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2	Beverly Hills, California 90212 T: (310) 271.6223	
3	F: (310) 271.9805	
4	E: Michael.Berger@bankruptcypower.com	
5	Proposed Counsel for Debtor-in-Possession Shields Nursing Centers, Inc.	
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7	UNITED STATES BA	ANKRUPTCY COURT
8	NORTHERN DISTRI	ICT OF CALIFORNIA
9	OAKLANI	DIVISION
10	In re:	) CASE NO.: 23-bk-41201 CN 11
11	Shields Nursing Centers, Inc.,	Chapter 11
12 13	Debtor-in-Possession.	DEBTOR'S MOTION PURSUANT TO SECTIONS 363(b) AND 105(a) OF THI BANKRUPTCY CODE FOR ORDER
14		AUTHORIZING DEBTOR TO PAY CRITICAL VENDORS;
15		MEMORANDUM OF POINTS AND AUTHORITIES; STATEMENT
16 16		REGARDING CASH COLLATERAL; DECLARATION OF WILLIAM M.
17		) SHIELDS JR. IN SUPPORT ) THEREOF
18		)   [Hearing Requested on Shortened Notice] 
19		Date:
20		Time: Place: U.S. Bankruptcy Court
21		Courtroom 215 1300 Clay Street Oakland, CA 94612
22		Oakland, CA 94612
23		,
24	TO THE HONORABLE CHARLE	ES NOVACK, THE UNITED STATES
25	BANKRUPTCY JUDGE; THE OFFICE	OF THE UNITED STATES TRUSTEE;
26	SECURED CREDITORS; CRITICAL V	ENDORS ELAM'S CONSUTLING &
27	INSPECTION SERVICES INC., INTER	ACTIVE THERAPY ESSENTIALS,
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	DEBTOR'S MOTION PURSUANT TO SECTIONS 363(b) AND I	05(a) OF THE BANKRUPTCY CODE FOR ORDER AUTHORIZING

COLLATERAL: DECLARATION OF WILLIAM M. SHIELDS JR. IN SUPPORT THEREOF Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08

Page 1 of

DEBTOR TO PAY CRITICAL VENDORS; MEMORANDUM OF POINTS AND AUTHORITIES; STATEMENT REGARDING CASH

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# PROVIDENCE REHAB GROUP, INC., AND NUTRITION THERAPY ESSENTIALS; TWENTY LARGEST UNSECURED CREDITORS, AND PARTIES ENTITLED TO NOTICE:

#### **EMERGENCY MOTION**

Shields Nursing Centers, Inc., the debtor and debtor in possession in the above-captioned case ("Debtor"), moves, on shortened notice, for an order authorizing but not requiring the Debtor to pay certain Critical Vendors including Elam's Consulting & Inspection Service Inc., Interactive Medical Systems Inc., Nutrition Therapy Essentials, and Providence Rehab Group, Inc. as fully described herein (collectively referred to as the "Critical Vendors"), pursuant to Sections 105(a) and 363(b) of the of the United States Code, 11 U.S.C. §§ 101, et seq. (the "Bankruptcy Code"), and Rule 4001(b)(2) of the Federal Rule of Bankruptcy Procedure (the "Bankruptcy Rules").

The Debtor commenced its Chapter 11 bankruptcy case on September 20, 2023 (the "Petition Date"). The Debtor has one prior chapter 11 bankruptcy case filed on May 30, 2012 in the Northern District Bankruptcy Court, Case No.: 12-44638, in which case the Debtor was able to confirm a reorganization plan on April 16, 2014.

The Debtor was formed in November 1978 and operates a post-acute skilled nursing facilities in Richmond, California and El Cerrito, California, and serving the Contra Costa and surrounding counties. The locations for the nursing facilities are 1919 Cutting Blvd., Richmond, California 94804 ("Richmond") and 3230 Carlson Blvd., El Cerrito, California 94530 ("El Cerrito").

The total capacity for the two facilities combined is 125 beds, with 94 beds being currently occupied. Both facilities have a five-star rating. The Debtor services patients with all types of acute diagnosis, including but not limited to extensive rehabilitation to long-term dementia, and with a specialty in healing difficult wounds. About 90% percent

of Debtor's revenue is generated by Federal and State contracts (Medicare and Medi-Cal).

In the Richmond location, the Debtor has 83 beds, and at present time, 59 beds are occupied. The El Cerrito location has a capacity of 42 beds and currently 35 beds are occupied. The employees include physicians, nurses, therapists, psychologists, dietitians, and social service personnel.

The services performed by the employees include administering medications, helping patients with mobility and transfers, changing wound dressings, communicating with doctors and other healthcare providers, offering physical, occupational and speech therapies to improve patients' strength, coordination, balance, and communication abilities. The social workers employed by the Debtor provide emotional support to patients and their families, help coordinate post-discharge care, and connect the patients with community resources. The administrative staff handles scheduling and billing, maintains medical records, and assists with other logistic tasks. The goal is to help the patients recover from illness, injury or surgery and prepare them for a safe return to home or to a long-term care facility.

A summary total of all Critical Vendors, the pre-petition debt and a brief description of the goods/services they provide to the Debtor and why it is critical, is as follows:

Vendor	Prepetition Amount Owed	Goods/Service Provided to Debtor and Debtor's Necessity to Continue Working with Vendor
Elam's Consulting & Inspection Services Inc.	\$13,750.00 Exhibit "1"	Elam's Consulting and Inspection Services Inc. is the California State Inspector which must complete the inspection of the Debtor's nurse call system. Elam's Consulting and Inspection Services Inc. pending invoices are for the installation and inspection of the Debtor's new nurse call system. The Elam Consulting and Inspection Services Inc. is requiring to be paid its pre-petition invoices

		in order to continue its services and sign off on the installation and inspection of Debtor's new nurse call system. Failure to obtain the California State Inspector sign off could jeopardize the licensure of the Debtor's facilities.
Nutrition Therapy Essentials	\$5,292.00 Exhibit "2"	Nutrition Therapy Essentials is the exclusive vendor that provides dietician services to the Debtor. Debtor is required by health regulatory mandates to have its residents regularly reviewed by a dietician. Nutrition Therapy Essentials is the only company in the area that can provide dietician services to the Debtor's residents. Nutrition Therapy Essentials has stopped providing postpetition services to the Debtor and has indicated it will not continue providing services to the Debtor until the pre-petition past due invoice(s) are paid.
Providence Rehab Group, Inc.	\$146,235.60 Exhibit "3"	Providence Rehab has an exclusive contract with the Debtor to provide the Debtor's rehab patients physical therapy, occupational therapy and speech therapy services.  Providence Rehab must be paid its past-due balance so that it will continue to provide necessary therapy services to the Debtor's patients. The Debtor has already billed Medicare and the various insurance companies for the work performed by Providence Rehab and was paid for Providence Rehab's services. Debtor must pay Providence Rehab its portion of the insurance proceeds the Debtor has already collected to ensure will not be a disruption to Debtor's therapy services provided to its rehab patients.
Interactive Medical Systems Inc.	\$21,918.18 Exhibit "4"	Interactive Medical System is the sole provider of Oxygen tanks to the Debtor. Debtor must have a consistent supply to Oxygen tanks for its residents. Interactive Medical System indicated to the Debtor that it will stop services until the pre-petition invoices are paid in full. Requiring the Debtor to seek a new provider will cause a significant disruption to Debtor's business

		and to healthcare provided to Debtor's
		patients.
Total	\$187,195.74	

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In order to effectively reorganize, Debtor must continue to seek goods and/or services from the Critical Vendors which provide necessary dietician, oxygen tanks, therapy, nurse call and state level inspection services to the Debtor and so the Debtor can continue to provide the superior level of care it gives to its patients and to prevent the disruption of its operations and medical/therapy care to its patients. The Critical Vendors are all reasonably necessary which Debtor incurred during the ordinary course of its business. Debtor has exclusive contracts with several of the Critical Vendors and without payment to the Critical Vendors, Debtor may not be able to quickly engage another comparable vendor which would severely compromise Debtor's entire healthcare business. The Debtor requests authority from this Court to pay the outstanding prepetition invoices owed to the Critical Vendors, and incorporated herein as Exhibits "1-4" to ensure Debtor's continued business operations without any interruption. Payment to the Critical Vendors, as proposed by the Debtor, will allow the Debtor to continue doing business, preserve the Debtor's assets for the benefit of the estate and the creditors. The Debtor has a reasonable prospect of reorganization through Chapter 11. The relief sought herein will ensure no interruption of Debtor's business and will further allow Debtor to emerge as a reorganized Debtor.

The relief sought in the Motion is based upon the Motion, the attached Memorandum of Points and Authorities, declaration of William M. Shields Jr., concurrently with this motion and the Ex Parte Motion for Order Shortening Time. The relief sought in the Motion is also based on the statements, arguments, and representations of counsel to be made at the hearing on the Motion, and any other evidence properly presented to the Court at or prior to the hearing on the Motion.

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#### **MEMORANDUM OF POINTS AND AUTHORITIES**

#### I. INTRODUCTION

Shields Nursing Centers, Inc., the debtor and debtor in possession in the above-captioned case ("Debtor"), moves, on shortened notice, for an order authorizing, but not requiring, the Debtor to pay certain Critical Vendors including Elam's Consulting & Inspection Service Inc., Interactive Medical Systems Inc., Nutrition Therapy Essentials, and Providence Rehab Group, Inc. (collectively referred to as the "Critical Vendors"), pursuant to Sections 105(a) and 363(b) of the of the United States Code, 11 U.S.C. §§ 101, et seq. (the "Bankruptcy Code"), and Rule 4001(b)(2) of the Federal Rule of Bankruptcy Procedure (the "Bankruptcy Rules").

#### II. JURISDICTION AND VENUE

This Court has jurisdiction over the subject matter of this motion (the "Motion") pursuant to 28 U.S.C. §§ 157 and 1334, the Order Referring Bankruptcy Cases and Proceedings to Bankruptcy Judges, General Order 24 (N.D. Cal. Feb. 22, 2016), and Rule 5011-1(a) of the Bankruptcy Local Rules for the United States District Court for the Northern District of California (the "Bankruptcy Local Rules"). Venue is proper in this Court pursuant to 28 U.S.C. §§ 1408 and 1409. This matter is a core proceeding under 28 U.S.C. § 157(b). The statutory authority for the motion is under 11 USC §§ 105(a) and 363(b). The Debtor consents to the entry by the Court of a final order with respect to this Motion.

#### III. INTRODUCTORY STATEMENT

#### A. General Background

On September 20, 2023 (the "Petition Date"), the Debtor commenced the Chapter

11 Case by filing a voluntary petition under chapter 11 of the Bankruptcy Code. The

Debtor continues to operate its business and manage its property as a debtor in possession

DEBTOR'S MOTION PURSUANT TO SECTIONS 363(b) AND 105(a) OF THE BANKRUPTCY CODE FOR ORDER AUTHORIZING DEBTOR TO PAY CRITICAL VENDORS, MEMORANDUM OF POINTS AND AUTHORITIES; STATEMENT REGARDING CASH COLLATERAL; DECLARATION OF WILLIAM M. SHIELDS JR. IN SUPPORT THEREOF

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pursuant to sections 1107(a) and 1108 of the Bankruptcy Code. No official committee of unsecured creditors has been appointed in the Case.

The Debtor was formed in November 1978 and operates a post-acute skilled nursing facilities in Richmond, California and El Cerrito, California, and serving the Contra Costa and surrounding counties. The total capacity for the two facilities combined is 125 beds, with 94 beds being currently occupied. Both facilities have a five-star rating. The Debtor services patients with all types of acute diagnosis, including but not limited to extensive rehabilitation to long-term dementia, and with a specialty in healing difficult wounds. About 90% percent of Debtor's revenue is generated by Federal and State contracts (Medicare and Medi-Cal).

In the Richmond location, the Debtor has 83 beds, and at present time, 59 beds are occupied. The El Cerrito location has a capacity of 42 beds and currently 35 beds are occupied. The employees include physicians, nurses, therapists, psychologists, dietitians, and social service personnel.

The services performed by the employees include administering medications, helping patients with mobility and transfers, changing wound dressings, communicating with doctors and other healthcare providers, offering physical, occupational and speech therapies to improve patients' strength, coordination, balance, and communication abilities, The social workers employed by the Debtor provide emotional support to patients and their families, help coordinate post-discharge care, and connect the patients with community resources. The administrative staff handles scheduling and billing, maintains medical records, and assists with other logistic tasks. The goal is to help the patients recover from illness, injury or surgery and prepare them for a safe return to home or to a long-term care facility.

#### B. Debtor's Need for to Pay Critical Vendors and Affected Parties

The Debtor has determined that absent the ability to pay the Critical Vendors, it will be unable to operate its business during the Chapter 11 Case, irreparably harming the Debtor's estate and creditors. If the Debtor is unable, on a consistent basis, to maintain its business and provide the medical care services to its patients, the Debtor will not be able to run its business, will not be able to provide superior healthcare services to its existing and new patients, and will ultimately be forced to cease operations. This will cause harm to the Debtor, but also to its patients who need 24/7 health care services which the Debtor can only provide if its business model is not interrupted. In order to continue the Debtor's daily operations, the Debtor must pay its Critical Vendors which provide necessary dietician services, oxygen tanks, physical speech and occupational therapy services, nurse call and state level inspection services to the Debtor.

Furthermore, lack of Debtor's ability to pay its Critical Vendors will harm the creditors of the estate because the Critical Vendors will cease to provide services to the Debtor, most of which have exclusive contracts with the Debtor, termination of which will severely disrupt the Debtor's business operations, thus causing the Debtor's business operation to cease, resulting in no revenue coming in to support the plan payments to be proposed through a plan of reorganization. Therefore, the Debtor's continued business with the Critical Vendors is absolutely necessary to preserve and maximize the value of its assets for the benefit of all parties in interest. Thus, the Debtor's ability to pay its Critical Vendors is essential to Debtor's continued ability to operate and provide proper service to its clients until consummation of a plan.

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 A summary total of all Critical Vendors, the pre-petition debt and a brief description of the goods/services they provide to the Debtor and why it is critical, is as follows:

Vendor	Prepetition Amount Owed	Goods/Service Provided to Debtor and Debtor's Necessity to Continue Working with Vendor
Elam's Consulting &	\$13,750.00	Elam's Consulting and Inspection Services
Inspection Services Inc.	- 101	Inc. is the California State Inspector which
	Exhibit "1"	must complete the inspection of the Debtor's nurse call system. Elam's Consulting and
		Inspection Services Inc. pending invoices
		are for the installation and inspection of the
		Debtor's new nurse call system. The Elam
		Consulting and Inspection Services Inc. is
		requiring to be paid its pre-petition invoices
		in order to continue its services and sign off
		on the installation and inspection of Debtor's new nurse call system. Failure to obtain the
		California State Inspector sign off could
		jeopardize the licensure of the Debtor's
		facilities.
Nutrition Therapy	\$5,292.00	Nutrition Therapy Essentials is the exclusive
Essentials	F 121 4 402	vendor that provides dietician services to the
	Exhibit "2"	Debtor. Debtor is required by health regulatory mandates to have its residents
		regularly reviewed by a dietician. Nutrition
		Therapy Essentials is the only company in
		the area that can provide dietician services to
		the Debtor's residents. Nutrition Therapy
		Essentials has stopped providing post-
		petition services to the Debtor and has
		indicated it will not continue providing services to the Debtor until the pre-petition
		past due invoice(s) are paid.
Providence Rehab	\$146,235.60	Providence Rehab has an exclusive contract
Group, Inc.		with the Debtor to provide the Debtor's
•	Exhibit "3"	rehab patients physical therapy, occupational
		therapy and speech therapy services.
		Providence Rehab must be paid its past-due balance so that it will continue to provide
		necessary therapy services to the Debtor's
L	<u> </u>	Interest of the parties of the Parties of

DEBTOR'S MOTION PURSUANT TO SECTIONS 363(b) AND 105(a) OF THE BANKRUPTCY CODE FOR ORDER AUTHORIZING DEBTOR TO PAY CRITICAL VENDORS, MEMORANDUM OF POINTS AND AUTHORITIES; STATEMENT REGARDING CASH

COLLATERAL: DECLARATION OF WILLIAM M. SHIELDS JR. IN SUPPORT THEREOF

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Interactive Medical Systems Inc.	\$21,918.18 Exhibit "4"	patients. The Debtor has already billed Medicare and the various insurance companies for the work performed by Providence Rehab and was paid for Providence Rehab's services. Debtor must pay Providence Rehab its portion of the insurance proceeds the Debtor has already collected to ensure will not be a disruption to Debtor's therapy services provided to its rehab patients.  Interactive Medical System is the sole provider of Oxygen tanks to the Debtor. Debtor must have a consistent supply to Oxygen tanks for its residents. Interactive Medical System indicated to the Debtor that it will stop services until the pre-petition invoices are paid in full. Requiring the Debtor to seek a new provider will cause a significant disruption to Debtor's business and to healthcare provided to Debtor's
Total	\$187,195.74	and to healthcare provided to Debtor's patients.

(Collectively the "Critical Vendors").

A true and correct copy of all outstanding Critical Vendor invoices are attached to the Declaration of William M. Shields Jr. as **Exhibits "1-4."** 

As indicated above, the Debtor has numerous exclusive contracts. The Debtor has established business relationships with the Critical Vendors and protocols to ensure the Debtor's patients are receiving proper nutritional guidance, physical occupational and speech therapy, and necessary oxygen tanks. Further, The Debtor needs its nurse call system to complete final inspection, failure of which could jeopardize the Debtor's licensing and ability to do business. The Debtor has honed vendor selection and relief on the Critical Vendors for continued post-petition operations. The Critical Vendors provide goods and services that are imperative to the Debtor's ongoing business operations and any disruption of these service, even for a brief period of time, could be disastrous to the Debtor's business and ability to reorganize.

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#### THE DEBTOR SHOULD BE PERMITTED TO PAY ITS CRITICAL IV. **VENDORS**

#### A. The Relief Requested Is Authorized by 11 U.S.C. § 363(b) and 105(a)

By this Motion, the Debtor requests entry of an order pursuant to Sections and 363(b) the Bankruptcy Code to pay Critical Vendors a total amount of \$187,195.74 to avoid any interruption in the Debtor's ongoing business operations.

The fundamental purpose of reorganization is to prevent a debtor from going into liquidation, with an attendant loss of jobs and possible misuse of economic resources." NLRB v Bildisco & Bildisco, 465 U.S. 513, 528 (1984). Section 363(b) of the Bankruptcy Code provides, in relevant part, that "[t]he [debtor], after notice and a hearing, may use, sell, or lease, other than in the ordinary course of business, property of the estate." 11 U.S.C. § 363(b)(1). Under Section 363, a court may authorize a debtor to pay certain prepetition claims where a sound business purpose exists for doing so. See In re Ionosphere Clubs, Inc., 98 B.R. 174, 175 (Bankr. S.D.N.Y. 1989).

Numerous courts have acknowledged that payment of prepetition obligations, even outside statutory priorities, may be necessary to realize the objectives of the Bankruptcy Code, such as the preservation and enhancement of the value of a debtor's estate as a going concern for the benefit of creditors and other stakeholders. See, e.g., Czyzewski v. Jevic Holding Corp., 137 S. Ct. 973, 985 (2017) ("Courts, have approved . . . 'critical vendor' orders that allow payment of essential suppliers' prepetition invoices," typically finding that those payments would "enable a successful reorganization and make even the disfavored creditors better off."); see also, In re Kmart Corp., 359 F. 3d 866, 872 (CA7 2004) (addressing justifications for critical vendor orders); In re Just For Feet, Inc., 242 B.R. 821, 826 (D. Del. 1999) (allowing payment of prepetition claim because debtor could not survive without maintaining customer relationship); accord, In re PG&E Corp.,

Bankr. N.D. Cal., 19-30088, Dkt No. 883 (Final Order. . . Authorizing Debtors to Pay Prepetition Obligations).

# B. Authority To Pay Critical Vendors on Shortened Notice Is Warranted Under 11 U.S.C. § 363(b) And Rule 4001(B) To Allow The Debtor To Operate Its Business

The Debtor has requested a hearing on shortened to consider the relief requested in this Motion. Sections 363(b) and Rule 4001(b)(2) require the Court to schedule a cash collateral hearing in accordance with the needs of the Debtor and conduct a preliminary hearing for the purpose of authorizing the use of cash collateral to the extent necessary to avoid irreparable harm to the Debtor. Section 363(c)(3) mandates that "[a]ny hearing [on the use of cash collateral] ...shall be scheduled in accordance with the needs of the debtor". The Ninth Circuit has recognized that emergency relief is often crucial to the success of a corporate reorganization:

We realize that "in certain circumstances, the entire reorganization effort may be thwarted if emergency relief is withheld" and that reorganization under the Bankruptcy Code "is a perilous process, seldom more so than at the outset of the proceedings when the debtor is often without sufficient cash flow to fund essential business operations". It is for this very reason that Congress specified that hearings concerning the use of cash collateral "shall be scheduled in accordance with the needs of the debtor". 11 U.S.C. § 363(c)(3).

In re Center Wholesale, Inc., 759 F.2d 1440, 1449 n. 21 (9th Cir. 1985) (citations omitted).

The Debtor filed its Motion Pursuant to Section 363(b) Of The Bankruptcy Code
And Rule 4001(B) Of The Federal Rules Of Bankruptcy Procedure For Order
Authorizing Use Of Cash Collateral [docket no.: 8] (the "Cash Collateral Motion") on

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September 21, 2023. The final hearing approving use of cash collateral generated by the Debtor will take place on October 13, 2023. At the time the Debtor filed the Cash Collateral Motion, the Debtor did not contemplate needing to file a Critical Vendor Motion or that the Critical Vendors would refuse to continue to do business with the Debtor unless their pre-petition claims were paid. As such, Debtor requests that through this Critical Vendor Motion, the Court allow the Debtor to make the requested payments to the Critical Vendors, which were not listed within the Debtor's Cash Collateral budget. As of the filing of this Critical Vendor Motion, the Debtor has approximately \$417,000 in its receivable account and will be able to make the payments to the Critical Vendors within a reasonable period of time, while continuing to meet its other post-petition expenses and obligations.

The Debtor submits that it has satisfied the "immediate and irreparable harm" standard of Bankruptcy Rule 4001. The relief requested in this Motion is necessary to allow the Debtor to continue functioning, preserve the value of the Debtor's estate, prevent substantial administrative burden, and to expediently restructure its business affairs. These benefits will only be realized if the relief requested is granted as soon as possible. Accordingly, the Debtor requests that the Court approve the relief requested in this Motion on shortened notice. In an abundance of caution, the Debtor also respectfully requests that the Court waive the fourteen-day stay imposed by Bankruptcy Rule 6004(h) to the extent applicable here, as the exigent nature of the relief sought herein justifies immediate relief.

#### V. NOTICE

Notice of this Motion, whether by U.S. mail, will be given to the following parties: (a) the United States Trustee for the Northern District of California; (b) all secured creditors; (c) the Critical Vendors; (d) the twenty largest unsecured creditors for the Debtor; (e) the Debtor's identified, interested taxing authorities, including the Internal Revenue Service; and (f) any party that has requested notice pursuant to Bankruptcy Rule 2002. The method of service for each party will be described more fully in the certificate of service prepared by Debtor's counsel.

The Debtor respectfully submits that, under the circumstances, such notice is sufficient, and that no other or further notice of this Motion is required.

#### VI. CONCLUSION

WHEREFORE, the Debtor respectfully requests that this Court enter an order, in the form attached to the Declaration of William M. Shields Jr. as **Exhibit "5"** authorizing Debtor to pay its Critical Vendors; and granting the Debtor such other and further relief as is just and proper under the circumstances.

LAW OFFICES, OF MICHAEL JAY BERGER

Dated: October /2, 2023

By:

Michael Jay Berger

Proposed Counsel for Debtor-in-Possession

Shields Nursing Centers, Inc.

#### DECLARATION OF WILLIAM M. SHIELDS JR.

- I, William M. Shields Jr., declare and state as follows:
- 1. I am the Chief Executive Officer of Shields Nursing Centers, Inc. (the "Debtor") herein. I have personal knowledge of the facts set forth below and if called to testify as to those facts, I could and would competently do so.
- 2. Debtor moves, on shortened basis, for an order authorizing but not requiring the Debtor to pay certain Critical Vendors as fully described herein (collectively referred to as the "Critical Vendors").
- 3. The Debtor commenced its Chapter 11 bankruptcy case on September 20, 2023 (the "Petition Date"). The Debtor has one prior chapter 11 bankruptcy case filed on May 30, 2012 in the Northern District Bankruptcy Court, Case No.: 12-44638, in which case the Debtor was able to confirm a reorganization plan on April 16, 2014.
- 4. The Debtor was formed in November 1978 and operates a post-acute skilled nursing facilities in Richmond, California and El Cerrito, California, and serving the Contra Costa and surrounding counties. The locations for the nursing facilities are 1919 Cutting Blvd., Richmond, California 94804 ("Richmond") and 3230 Carlson Blvd., El Cerrito, California 94530 ("El Cerrito").
- 5. The total capacity for the two facilities combined is 125 beds, with 94 beds being currently occupied. Both facilities have a five-star rating. The Debtor services patients with all types of acute diagnosis, including but not limited to extensive rehabilitation to long-term dementia, and with a specialty in healing difficult wounds. About 90% percent of Debtor's revenue is generated by Federal and State contracts (Medicare and Medi-Cal).
- 6. In the Richmond location, the Debtor has 83 beds, and at present time, 59 beds are occupied. The El Cerrito location has a capacity of 42 beds and currently 35

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- The services performed by the employees include administering 7. medications, helping patients with mobility and transfers, changing wound dressings, communicating with doctors and other healthcare providers, offering physical, occupational and speech therapies to improve patients' strength, coordination, balance, and communication abilities. The social workers employed by the Debtor provide emotional support to patients and their families, help coordinate post-discharge care, and connect the patients with community resources. The administrative staff handles scheduling and billing, maintains medical records, and assists with other logistic tasks. The goal is to help the patients recover from illness, injury or surgery and prepare them for a safe return to home or to a long-term care facility.
- In order to effectively reorganize, Debtor must continue to seek goods 8. and/or services from the Critical Vendors which provide necessary dietician, oxygen tanks, therapy, nurse call and state level inspection services to the Debtor and so the Debtor can continue to provide the superior level of care it gives to its patients and to prevent the disruption of its operations and medical/therapy care to its patients. The Critical Vendors are all reasonable expenses which Debtor incurred during the ordinary course of its business. Debtor has exclusive contracts with several of the Critical Vendors and without payment to the Critical Vendors, Debtor may not be able to quickly engage another comparable vendor which would severely compromise Debtor's entire healthcare business.
- The Debtor requests authority from this Court to pay the outstanding pre-9. petition invoices owed to the Critical Vendors, and incorporated herein as Exhibits "1-4" to ensure Debtor's continued business operations without any interruption. Payment to the Critical Vendors, as proposed by the Debtor, will allow the Debtor to continue doing

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business, preserve the Debtor's assets for the benefit of the estate and the creditors. The Debtor has a reasonable prospect of reorganization through Chapter 11. The relief sought herein will ensure no interruption of Debtor's business and will further allow Debtor to emerge as a reorganized Debtor.

- The Debtor has determined that absent the ability to pay the Critical 10. Vendors, it will be unable to operate its business during the Chapter 11 Case, irreparably harming the Debtor's estate and creditors. If the Debtor is unable, on a consistent basis, to maintain its business and provide the medical care services to its patients, the Debtor will not be able to run its business, will not be able to provide superior healthcare services to its existing and new patients, and will ultimately be forced to cease operations. This will cause harm to the Debtor, but also to its patients who need 24/7 health care services which the Debtor can only provide if its business model is not interrupted. In order to continue the Debtor's daily operations, the Debtor must pay its Critical Vendors which provide necessary dietician services, oxygen tanks, physical speech and occupational therapy services, nurse call and state level inspection services to the Debtor.
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Interactive Medical Systems Inc.	\$21,918.18 Exhibit "4"	Medicare and the various insurance companies for the work performed by Providence Rehab and was paid for Providence Rehab's services. Debtor must pay Providence Rehab its portion of the insurance proceeds the Debtor has already collected to ensure will not be a disruption to Debtor's therapy services provided to its rehab patients.  Interactive Medical System is the sole provider of Oxygen tanks to the Debtor. Debtor must have a consistent supply to Oxygen tanks for its residents. Interactive Medical System indicated to the Debtor that it will stop services until the pre-petition invoices are paid in full. Requiring the Debtor to seek a new provider will cause a significant disruption to Debtor's business and to healthcare provided to Debtor's patients.
Total	\$187,195.74	

(Collectively the "Critical Vendors").

- 13. A true and correct copy of all outstanding Critical Vendor invoices are attached hereto as **Exhibits "1-4."**
- Debtor has established business relationships with the Critical Vendors and protocols to ensure the Debtor's patients are receiving proper nutritional guidance, physical occupational and speech therapy, and necessary oxygen tanks. Further, The Debtor needs its nurse call system to complete final inspection, failure of which could jeopardize the Debtor's licensing and ability to do business. The Debtor has honed vendor selection and relief on the Critical Vendors for continued post-petition operations. The Critical Vendors provide goods and services that are imperative to the Debtor's ongoing business operations and any disruption of these service, even for a brief period of time, could be disastrous to the Debtor's business and ability to reorganize.

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- By this Motion, the Debtor requests entry of an order pursuant to Sections 15. and 363(b) the Bankruptcy Code to pay Critical Vendors a total amount of \$187,195.74 to avoid any interruption in the Debtor's ongoing business operations.
- The Debtor filed its Motion Pursuant To Section 363(C) Of The 16. Bankruptcy Code And Rule 4001(B) Of The Federal Rules Of Bankruptcy Procedure For Order Authorizing Use Of Cash Collateral [docket no.: 8] (the "Cash Collateral Motion") on September 21, 2023. The final hearing approving use of cash collateral generated by the Debtor will take place on October 13, 2023. At the time the Debtor filed the Cash Collateral Motion, the Debtor did not contemplate needing to file a Critical Vendor Motion or that the Critical Vendors would refuse to continue to do business with the Debtor unless their pre-petition claims were paid. As such, Debtor requests that through this Critical Vendor Motion, the Court allows these one time payments to the Critical Vendors, which were not listed within the Debtor's Cash Collateral budget. As of the filing of this Critical Vendor Motion, the Debtor has approximately \$417,000 in its receivable account and will be able to make the payments to the Critical Vendors within a reasonable period of time, while continuing to meet its other post-petition expenses and obligations.
- The Debtor submits that it has satisfied the "immediate and irreparable 17. harm" standard of Bankruptcy Rule 4001. The relief requested in this Motion is necessary to allow the Debtor to continue functioning in the short term, preserve the value of the Debtor's estate, prevent substantial administrative burden and confusion, and to expediently restructure its business affairs. These benefits will only be realized if the relief requested is granted as soon as possible. Accordingly, the Debtor requests that the Court approve the relief requested in this Motion on shortened notice. In an abundance of caution, the Debtor also respectfully requests that the Court waive the fourteen-day stay

1	imposed by Bankruptcy Rule 6004(h) to the extent applicable here, as the exigent nature
2	of the relief sought herein justifies immediate relief.
3	I declare under penalty of perjury that the foregoing is true and correct and
4	that this declaration is executed on October 12th, 2023 at 15 Cules, California.
5	S/M m M/
6	William M. Shields Jr.
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	DEBTOR'S MOTION PURSUANT TO SECTIONS 363(b) AND 105(a) OF THE BANKRUPTCY CODE FOR ORDER AUTHORIZING DEBTOR TO PAY CRITICAL VENDORS; MEMORANDUM OF POINTS AND AUTHORITIES; STATEMENT REGARDING CASH COLLATERAL; DECLARATION OF WILLIAM M. SHIELDS JR. IN SUPPORT THEREOF

Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 22 of 135

## **EXHIBIT 1**

Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 23 of

#### Summary of Invoices

\$ 1,500.00
\$ 3,375.00
\$ 875.00
\$ 5,125.00
\$ 750.00
\$ 1,000.00
\$ 1,125.00
-
\$ 13,750.00
Total

Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 24 of

DAN ELAM, IOR

Attn.: William Shields

INV. NO. 1
RICHMOND NURSE
CALL

August 14, 2023

#### Shield's SNFS Project Recharge Work Sheet DAN ELAM July-23

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\$1,500.00 TOTAL AMOUNT DUE

Total Base Rate Amount Due:

\$1,500.00

Total Reimbursable Mileage Due:

TOTAL DUE THIS INVOICE: \$1,500.00

This invoice is due and payable per the contract commencing October 20th 2015.

Signed:

Dan Elam, Owner

Elam's Consulting & Inspection Services Inc. 164 Robles Dr. #270 Vallejo, CA. 94591 Ph. (707) 695-2129 <a href="mailto:iordanelam@comcast.net">iordanelam@comcast.net</a>

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DAN ELAM, IOR

INV. NO. 2 Attn.: William Shields RICHMOND NURSE CALL

September 3, 2023

#### Shield's SNFS Project Recharge Work Sheet DAN ELAM August-23

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\$3,375.00 TOTAL AMOUNT DUE

Total Base Rate Amount Due: \$3,375.00

Total Reimbursable Mileage Due:

TOTAL DUE THIS INVOICE: \$3,375.00

This invoice is due and payable per the contract commencing October 20th 2015.

Signed:

Dan Elam, Owner

Elam's Consulting & Inspection Services Inc. 164 Robles Dr. #270 Vallejo, CA. 94591 Ph. (707) 695-2129 iordanelam@comcast.net

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DAN ELAM, IOR

Attn.: William Shields

INV. NO. 3
RICHMOND NURSE
CALL

October 3, 2023

#### Shield's SNFS Project Recharge Work Sheet DAN ELAM September-23

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\$875.00 TOTAL AMOUNT DUE

Total Base Rate Amount Due:

\$875.00

Total Reimbursable Mileage Due: TOTAL DUE THIS INVOICE:

\$875.00

This invoice is due and payable per the contract commencing October 20th 2015.

Signed:

Dan Elam, Owner

Elam's Consulting & Inspection Services Inc. 164 Robles Dr. #270 Vallejo, CA. 94591 Ph. (707) 695-2129 iordanelam@comcast.net

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DAN ELAM, IOR

Attn.: William Shields INV. NO. 7 EL
CERRITO NURSE

July 5, 2023

CALL

## Shield's SNFS Project Recharge Work Sheet DAN ELAM June-23

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\$5,125.00 TOTAL AMOUNT DUE

Total Base Rate Amount Due:

\$5,125.00

Total Reimbursable Mileage Due: **TOTAL DUE THIS INVOICE**:

\$5,125.00

This invoice is due and payable per the contract commencing April 2020.

Signed:

Dan Elam, Owner

Elam's Consulting & Inspection Services Inc. 164 Robles Dr. #270 Vallejo, CA. 94591 Ph. (707) 695-2129 iordanelam@comcast.net

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DAN ELAM, IOR

Attn.: William Shields

INV. NO. 8 EL

CERRITO NURSE

CALL

August 14, 2023

#### Shield's SNFS Project Recharge Work Sheet DAN ELAM July-23

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\$750.00 TOTAL AMOUNT DUE

Total Base Rate Amount Due: \$750.00

Total Reimbursable Mileage Due:

TOTAL DUE THIS INVOICE: \$750.00

This invoice is due and payable per the contract commencing April 2020.

Signed:

Dan Elam, Owner

Elam's Consulting & Inspection Services Inc. 164 Robles Dr. #270 Vallejo, CA. 94591 Ph. (707) 695-2129 iordanelam@comcast.net

Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 29 of

## Elam's Consulting & Inspection Services Inc. DAN ELAM, IOR

Attn.: William Shields

INV. NO. 9 EL

CERRITO NURSE

CALL

September 3, 2023

## Shield's SNFS Project Recharge Work Sheet DAN ELAM August-23

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PA No.	Facility	Project Title	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	TOTA
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\$1,000.00 TOTAL AMOUNT DUE

Total Base Rate Amount Due: \$1,000.00

Total Reimbursable Mileage Due:

TOTAL DUE THIS INVOICE: \$1,000.00

This invoice is due and payable per the contract commencing April 2020.

Signed:

Dan Elam, Owner

Elam's Consulting & Inspection Services Inc. 164 Robles Dr. #270 Vallejo, CA. 94591 Ph. (707) 695-2129 iordanelam@comcast.net

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DAN ELAM, IOR

Attn.: William Shields

INV. NO. 10 EL CERRITO NURSE CALL

October 2, 2023

#### Shield's SNFS Project Recharge Work Sheet DAN ELAM September-23

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\$1,125.00 TOTAL AMOUNT DUE

Total Base Rate Amount Due:

\$1,125.00

Total Reimbursable Mileage Due: TOTAL DUE THIS INVOICE:

\$1,125.00

This invoice is due and payable per the contract commencing April 2020.

Signed:

Dan Elam, Owner

Elam's Consulting & Inspection Services Inc. 164 Robles Dr. #270 Vallejo, CA. 94591 Ph. (707) 695-2129 iordanelam@comcast.net

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## **EXHIBIT 2**

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## Nutrition Therapy Essentials Summary of Invoices

\$ 1,071.00
\$ 4,221.00
\$ 5,292.00
Total

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2350 W Shaw Ave Ste 106
Fresno, CA 93711 US
559-451-0460
Suzanne@Nutritiontherapyessentials.com



DATE 09/01/2023
DUE DATE 10/01/2023
TERMS Net 30

BILL TO
Arvind Lal
Shields Nursing Center
606 Alfred Nobel Dr
Hercules, CA 94547

#### PLEASE DETACH TOP PORTION AND RETURN WITH YOUR PAYMENT.

08/03/2023	SNF Consulting Clinical Services	3:00	63.00	189.00
08/10/2023	SNF Consulting Clinical Services	4:00	63.00	252.00
08/17/2023	SNF Consulting Clinical Services	5:00	63.00	315.00
08/31/2023	SNF Consulting Clinical Services	5:00	63.00	315.00

**\$1,071.00** 

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2350 W Shaw Ave Ste 106 Fresno, CA 93711 US 559-451-0460 Suzanne@Nutritiontherapyessentials.com



INVOICE # 23764 DATE 09/01/2023 **DUE DATE 10/01/2023** TERMS Net 30

**BILL TO** 

Shields Richmond Nursing

Center

606 Alfred Nobel Dr

Hercules, CA 94547

PLEASE DETACH TOP PORTION AND RETURN WITH YOUR PAYMENT.

08/01/2023	SNF Consulting Clinical Services	8:00	63.00	504.00
08/03/2023	SNF Consulting Clinical Services	8:00	63.00	504.00
08/07/2023	SNF Consulting Clinical Services	6:00	63.00	378.00
08/11/2023	SNF Consulting Clinical Services	6:00	63.00	378.00
08/15/2023	SNF Consulting Clinical Services	8:00	63.00	504.00
08/18/2023	SNF Consulting Clinical Services	8:00	63.00	504.00
08/22/2023	SNF Consulting Clinical Services	7:00	63.00	441.00
08/25/2023	SNF Consulting Clinical Services	8:00	63.00	504.00
08/29/2023	SNF Consulting Clinical Services	8:00	63.00	504.00

BALANCE DUE

\$4.221.00

## **EXHIBIT 3**

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# Providence Rehab Group, Inc. Summary of Invoices

\$ 53,919.02	
\$ 12,515.00	
\$ 61,658.84	
\$ 18,142.70	
\$ 146,235.56	
Total	

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#### Providence Rehab Group, Inc. P.O. Box 5215 Novato, CA 94948-5215 US +1 4152250126

om

providence.kenneth2022@gmail.c

#### Invoice 1092



BILL TO Shields Nursing Center, Inc. 1919 Cutting Blvd. Richmond, CA 94804		DATE 07/31/2023	PLEASE PAY \$53,919.02	DUE DATE 08/30/2023
DATE	ACTIVITY			AMOUNT
07/01/2023	Medicare Part A Med A Physical Therapy			9,090.60
	Med A Occupational Therapy 48.27% (\$4,388.03)			
	Med A Physical Therapy 51.73% (\$4,702.57)			404.47
07/01/2023	Medicare Part B Medicare Part B Therapy Services			484.17
	Med B Occupational Therapy 10 units (\$248.69)			
	Med B Physical Therapy 9 units (\$235.48)			42,311.25
07/01/2023	HMO Managed Care HMO Managed Care			42,311.25
	HMO Occupational Therapy 15,714 minutes (\$19,642.50)			
	HMO Physical Therapy 15,995 minutes (\$19,993.75)			
	HMO Speech Therapy 2,140 minutes (\$2,675.00)			2,033.00
07/31/2023	HMO PDPM - Medicare HMO PDPM - Medicare			2,033.00
SNC Richmond	(July 2023)			<b>ATA 040 00</b>
		TOTAL DUE		\$53,919.02
		8-1-1-20		THANK YOU.

#### Providence Rehab Group, Inc. P.O. Box 5215 Novato, CA 94948-5215 US

Invoice 1093

+1 4152250126 providence.kenneth2022@gmail.c om

BILL TO Shields Nursing 3230 Carlson Bly El Cerrito, CA 9 United States	vd.	DATE 08/31/2023	PLEASE PAY \$12,515.20	DUE DATE 09/30/2023
DATE	ACTIVITY			AMOUNT
08/01/2023	Medicare Part A			3,210.00
	Med A Physical Therapy  Med A Occupational Therapy  48.02% (\$1,541.44)			
	Med A Physical Therapy 51.98% (\$1,668.56)			
08/01/2023	Medicare Part B Medicare Part B Therapy Services			264.45
	Med B Physical Therapy 9 units (\$264.45)			
08/01/2023	HMO Managed Care HMO Managed Care			3,583.75
	HMO Occupational Therapy 1,262 minutes (\$1,577.50)			
	HMO Physical Therapy 1,485 minutes (\$1,856.25)			
	HMO Speech Therapy 120 minutes (\$150.00)			
08/31/2023	HMO PDPM - Medicare HMO PDPM - Medicare			5,457.00
SNC El Cerrito	(August 2023)			
		TOTAL DUE		\$12,515.20
				THANK YOU.

### Providence Rehab Group, Inc.

P.O. Box 5215

Novato, CA 94948-5215 US

+1 4152250126

providence.kenneth2022@gmail.c

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THANK YOU.

1919 Cutting Blv	Shields Nursing Center, Inc. 1919 Cutting Blvd. Richmond, CA 94804		PLEASE PAY \$61,658.84	DUE DATE 09/30/2023
		-		
DATE	ACTIVITY			AMOUNT
08/01/2023	Medicare Part A Med A Physical Therapy			13,464.95
	Med A Occupational Therapy 49.65% (\$6,685.35)			
	Med A Physical Therapy 46.15% (\$6,214.07)			
	Med A Speech Therapy 4.20% (\$565.53)			
08/01/2023	Medicare Part B Medicare Part B Therapy Services			122.89
	Med B Occupational Therapy 3 units (\$122.89)			
08/01/2023	HMO Managed Care HMO Managed Care			46,145.00
	HMO Occupational Therapy 17,446 minutes (\$21,807.50)			
	HMO Physical Therapy 18,320 minutes (\$22,900.00)			
	HMO Speech Therapy 1,150 minutes (\$1,437.50)			
08/31/2023	HMO PDPM - Medicare HMO PDPM - Medicare			1,926.00
SNC Richmond	(August 2023)			
		TOTAL DUE		\$61,658.84

#### Providence Rehab Group, Inc. P.O. Box 5215 Novato, CA 94948-5215 US +1 4152250126

providence.kenneth2022@gmail.c

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#### Invoice 1091



BILL TO			
Shields Nursing Center Inc. 3230 Carlson Blvd. El Cerrito, CA 94530 United States	DATE	PLEASE PAY	DUE DATE
	07/31/2023	\$18,142.70	08/30/2023

DATE	ACTIVITY		AMOUNT
07/01/2023	Medicare Part A Med A Physical Therapy		3,527.70
	Med A Occupational Therapy 49.80% (\$1756.79)		
	Med A Physical Therapy 44.29% (\$1,562.42)		
	Med A Speech Therapy 5.91% (\$208.49)		
07/01/2023	Medicare Part B Medicare Part B Therapy Services		4,365.00
	Med B Occupational Therapy 72 units (\$1,752.64)		
	Med B Physical Therapy 85 units (\$1,964.22)		
07/01/2023	HMO Managed Care HMO Managed Care		4,365.00
	HMO Occupational Therapy 1,493 minutes (\$1,866.25)		
	HMO Physical Therapy 1,774 minutes (\$2,217.50)		
	HMO Speech Therapy 225 minutes (\$281.25)		
07/31/2023	HMO PDPM - Medicare HMO PDPM - Medicare		5,885.00
SNC El Cerrito (Ju	ly 2023)		
		TOTAL DUE	\$18,142.70

THANK YOU.

### **EXHIBIT 4**

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### Interactive Medical Systems Inc.

### Summary of Invoices

\$	95.17
\$	34.64
\$	669.34
\$	210.91
\$	210.91
\$	1,221.51
\$	95.71
\$	43.30
\$	210.91
\$	210.91
\$	113.58
\$	555.76
\$	1,230.17
\$	95.71
\$	95.71
\$	95.71
\$	30.31
\$	631.48
\$	210.91
\$	337.07
\$	243.36
\$_	1,740.26
\$	87.87
\$	111.39
\$	51.96
\$	113.58
\$	631.48
\$	210.91
\$	1,207.19
\$	134.91
\$	227.32
\$	265.02
\$	538.32
\$	1,165.57
\$	119.23
\$	241.43
\$	240.31
\$	142.75
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\$ 154.30
\$ 259.40
\$ 497.60
\$ 1,655.02
\$ 80.03
\$ 142.75
\$ 244.64
\$ 225.75
\$ 497.60
\$ 1,190.77
\$ 17.13
\$ 127.07
\$ 133.28
\$ 127.07
\$ 189.79
\$ 174.11
\$ 205.67
\$ 75.72
\$ 499.03
\$ 1,548.87
\$ 21,918.18
Total

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#### **FACSIMILE**

Date:

6/1/2023

To:

SHIELDS EL CERRITO

Attn:

Business Office Manager (A / P) 3230 Carlson Blvd

El Cerrito, CA 94530 Phone: 510-525-3212 Fax: 510-525-6832

From:

**Interactive Medical Systems** 

**Billing Department** 

Phone: 888-877-0209 x200

Fax: 888-877-0212 / 310-227-8229

Regarding

Oxygen Invoices for May

Please call our customer service representative, Lynette Powell with any questions that you may have this month. She can be reached at the number listed above at extension 200, or write your discrepancy on the invoice and fax back to us at 888-877-0212.

#### Thank you for doing business with us!

#### Lynette Powell

Health Care Information is personal and sensitive information related to a person's healthcare. Such information is being faxed to you after appropriate authorization from the patient or under circumstances that do not require patient authorization. You, the recipient, are obligated to maintain it in a safe, secure, and confidential manner. Re-disclosure without additional patient consent or as permitted by law is prohibited. Unauthorized re-disclosure or failure to maintain confidentiality could subject you to penalties under federal and state law. If you have received this fax in error and/or are not the intended recipient, please call us immediately at (714) 894-5029 ext. 200 to receive instruction regarding the destruction or return of this sensitive information...

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PLEASE INCLUDE THESE: MUMBERS WITH YOUR PAYMENT TO IN STURE PROPER CREDIT:

DATE	ACCT, NO	INVOICE NUMBER
5/24/2023	18313	00887858

PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

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H Shields El Cerrito,
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3230 Carlson Blvd
El Cerrito, CA 94530

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906835	5/23/2023	XXX DEL-ND SERIAL: RENTAL:			1	DELIVERY/PICKUP 5/23/2023 TO 5/23	FEE - STANDARD	\$17.31	\$17.31
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PLEASE INCLUDE THESE: NUMBERS WITH YOUR PAYMENT TO INSURE PROPER CREDIT

DATE	ACCT. NO	INVOICE	NUMBER
5/31/2023	18313	8800	9028

PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

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H Shields El Cerrito,
Shields El Cerrito
P 3230 Carlson Blvd
T El Cerrito, CA 94530

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_					SUBTOTAL		\$ 34.64
					ADJUSTMENT	ļ <u>.</u>	\$ 0.00
					TAX AMOUNT		\$ 0.00
				TH	AMOUNT IS INVOICE CLUDING TAX	\$	34.64



PLEASE INCLUDE THESE. NUMBERS WITH YOUR PAYMENT TO INSSURE PROPER CREDIT

DATE	ACCT. NO	INVOICE NUMBER
5/31/2023	18313	00889333

PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

s F O SHIELDS EL CERRITO 3230 Carlson Blvd El Cerrito, CA 94530 s F
H Shields El Cerrito,
Shields El Cerrito
3230 Carlson Blvd
El Cerrito, CA 94530

SHIPPING UMBER	G ORDER DATE	ITEM	QTY SHIP'D	DESCRIPTION	UNIT PRICE	AMOUNT
908548	5/31/2023	RNT HOLDER-E SERIAL:IM01093B RENTAL:IM01093B	1	RENT E CYLINDER HOLDER FOR W/C 5/1/2023 TO 5/31/2023	\$5.41	\$5,41
908548	5/31/2023	RNT RACK-E-12 SERIAL:IMS00840 RENTAL:IMS00840	1	RENT E CYLINDER RACK 12 COUNT 5/1/2023 TO 5/31/2023	\$15.00	\$15.00
908548	5/31/2023	RNT CON-5 SERIAL:07IF021524 RENTAL:IMS02722	1	RENT CONCENTRATOR 5LPM \$\(\int\)(1)\(\) 5/1/2023 TO 5/31/2023	\$37.86	\$37.86
908548	5/31/2023	RNT CON-5 SERIAL:04H766310 RENTAL:IMS03278	1	RENT CONCENTRATOR 5LPM	\$37.86	\$37.86
908548	5/31/2023	RNT REG-H SERIAL:IMS03330 RENTAL:IMS03330	1	RENT H CYLINDER REGULATOR 5/1/2023 TO 5/31/2023	\$5.41	\$5,41
908548	5/31/2023	RNT REG-H SERIAL:492628 RENTAL:IMS03344	1	RENT H CYLINDER REGULATOR 5/1/2023 TO 5/31/2023	\$5,41	\$5,41
908548	5/31/2023	RNT CART-E SERIAL:JY0350014 RENTAL:IMS04470	1	RENT E CYLINDER CART 5/1/2023 TO 5/31/2023	\$4.62	\$4.62
908548	5/31/2023	RNT CON-5 SERIAL:05C626671 RENTAL:IMS05056	1	RENT CONCENTRATOR 5LPM (10) 14	\$37.86	\$37.86
908548	5/31/2023	RNT CART-H SERIAL:IMS06602 RENTAL:IMS06602	1	RENT H CYLINDER CART-WHEELED 5/1/2023 TO 5/31/2023	\$9,73	\$9.73
908548	5/31/2023	RNT RACK-E-06 SERIAL:IMS07730 RENTAL:IMS07730	1	RENT E CYLINDER RACK 06 COUNT 5/1/2023 TO 5/31/2023	\$11.00	\$11.00
908548	5/31/2023	RNT CON-5 SERIAL:07CSZ416246 RENTAL:IMS08191	1	RENT CONCENTRATOR SLPM W/ (V) his	\$37,86	\$37.86
908548	5/31/2023	RNT HOLDER-E SERIAL:IMS08207 RENTAL:IMS08207	1	RENT E CYLINDER HOLDER FOR W/C 5/1/2023 TO 5/31/2023	\$5.41	\$5,41
908548	5/31/2023	RNT HOLDER-E SERIAL:IMS11434 RENTAL:IMS11434	1	RENT E CYLINDER HOLDER FOR W/C 5/1/2023 TO 5/31/2023	\$5.41	\$5.41
908548	5/31/2023	RNT RACK-E-06 SERIAL:IMS23739 RENTAL:IMS23739	1	RENT E CYLINDER RACK 06 COUNT 5/1/2023 TO 5/31/2023	\$11.00	\$11.00
908548	5/31/2023	RNT CON-5 SERIAL:16BF008900 RENTAL:IMS25595	1	RENT CONCENTRATOR 5LPM 7 1/2023 TO 5/31/2023	\$37.86	\$37,86
				SUBTOTAL	L	
				ADJUSTMEN'	Т	
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Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 48 of



PLEASE INCLUDE THESE INUMBERS WITH YOUR PAYMENT TO INSURE PROPER CREDIT

DATE	ACCT. NO	INVOICE NUMBER
5/31/2023	18313	00889333

### PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

s C O SHIELDS EL CERRITO 3230 Carlson Blvd El Cerrito, CA 94530

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Shields El Cerrito,
Shields El Cerrito
Shields El Cerrito
3230 Carlson Blvd
El Cerrito, CA 94530

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SHIPPIN UMBER	G ORDER DATE	ITEM	QTY SHIP'D	DESCRIPTION	UNIT PRICE	186
908548	5/31/2023	RNT CON-5 SERIAL:17CF031765 RENTAL:IMS27459	1	RENT CONCENTRATOR 5LPM 15/1/2023 TO 5/31/2023	\$37.86	\$37.86
908548	5/31/2023	RNT CON-10 SERIAL:17CF037991 RENTAL:IMS27624	1	RENT CONCENTRATOR 10LPM 37 1/2023 TO 5/31/2023	\$77.15	<b>\$7</b> 7.15
908548	5/31/2023	RNT CON-5 SERIAL:17IF031489 RENTAL:IMS28545	1	RENT CONCENTRATOR 5LPM TOLD CO	\$37.86	\$37.86
908548	5/31/2023	RNT CON-5 SERIAL:17KF021669 RENTAL:IMS28878	1	RENT CONCENTRATOR 5LPM (1)2-771	\$37.86	\$37.86
908548	5/31/2023	RNT BIPAP SERIAL:5252836 RENTAL:IMS34540	1	RENT BIPAP 5/1/2023 TO 5/31/2023	\$210.91	\$210.91
				SUBTOTAL	<del></del>	\$ 669.34
				ADJUSTMEN' TAX AMOUN'		\$ 0.00
		N 14		AMOUNT THIS INVOICE INCLUDING TAX		\$ 0.00 569.34

g Bisks



PLEASE INCLUDE THESE: NUMBERS WITH YOUR PAYMENT TO IN SURE PROPER CREDIT

DATE	ACCT. NO	INVOICE NUMBER
5/31/2023	42767	00889875

PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

S F
O SHIELDS EL CERRITO
D 3230 Carlson Blvd
El Cerrito, CA 94530
T El Cerrito, CA 94530
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909090	5/31/2023	RNT BIPAP SERIAL:23192858696	RENTAL:IMS346	79 1	RENT BIPAP 5/1/2023 TO 5/	31/2023	\$210.91	\$210:9
		213.746						
						SUBTO	TAL	\$ 210.91
						ADJUSTM		\$ 0.00
						TAX AMO	UNT	\$ 0.00
						AMOUNT THIS INVOICE INCLUDING TAX	\$2	10.91

Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 50 of



PLEASE INCLUDE THESE. NUMBERS WITH YOUR PAYMENT TO IN SURE PROPER CREDIT

DATE	ACCT, NO	INVOICE	NUMBER
5/31/2023	44849	0089	0377

PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

s F O SHIELDS EL CERRITO 3230 Carlson Blvd El Cerrito, CA 94530

0

H GARIBAY, PHILLIP
Shields El Cerrito

3230 Carlson Blvd El Cerrito, CA 94530



RDER N	UMBER	PURCHASE ORDER NUMBER	SLS	TER	SHIP VIA	TERMS	IN	TIALS	PAG
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909592	5/31/2023	RNT BIPAP SERIAL:J317465211337 RENT	AL:IMS35540	1	RENT BIPAP 5/1/2023 TO 5/3	1/2023	\$210.91	\$21	0.9
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#### MONTH END SUMMARY REPORT

### THIS IS NOT A BILL. PLEASE PAY FROM YOUR INVOICES, NOT THIS SUMMARY

#### SHIELDS EL CERRITO

Dear Sir / Madam.

This summary report contains charges for the current month for the patients listed below:

Inv Date	invoice #	Patient	ltem	DOS	Amount
SHIELDS	EL CERRIT	0			
5/24/2023	00887858	Shields El Cerrito,	EZOX GAS CONTENT	5/23/2023	\$ 78,40
5/24/2023	00887858	Shields El Cerrito,	DELIVERY/PICKUP FEE - STANDA	5/23/2023	\$ 17.31
5/31/2023	00889028	Shields El Cerrito,	EZOX CYLINDER RENTAL	5/1/2023	\$ 34,64
5/31/2023	00889333	Shields El Cerrito,	RENT E CYLINDER HOLDER FOR W	5/1/2023	\$ 5,41
5/31/2023	00889333	Shields El Cerrito,	RENT E CYLINDER RACK 12 COUN	5/1/2023	\$ 15,00
5/31/2023	00889333	Shields El Cerrito,	RENT CONCENTRATOR 5LPM	5/1/2023	\$ 37,86
5/31/2023	00889333	Shields El Cerrito,	RENT CONCENTRATOR 5LPM	5/1/2023	\$ 37.86
5/31/2023	00889333	Shields El Cerrito,	RENT H CYLINDER REGULATOR	5/1/2023	\$ 5,41
5/31/2023	00889333	Shields El Cerrito,	RENT H CYLINDER REGULATOR	5/1/2023	\$ 5.41
5/31/2023	00889333	Shields El Cerrito,	RENT E CYLINDER CART	5/1/2023	\$ 4.62
5/31/2023	00889333	Shields El Cerrito,	RENT CONCENTRATOR 5LPM	5/1/2023	\$ 37,86
5/31/2023	00889333	Shields El Cerrito,	RENT H CYLINDER CART-WHEELED	5/1/2023	\$ 9,73
5/31/2023	00889333	Shields El Cerrito,	RENT E CYLINDER RACK 06 COUN	5/1/2023	\$ 11.00
5/31/2023	00889333	Shields El Cerrito,	RENT CONCENTRATOR 5LPM	5/1/2023	\$ 37.86
5/31/2023	00889333	Shields El Cerrito,	RENT E CYLINDER HOLDER FOR W	5/1/2023	\$ 5.41
5/31/2023	00889333	Shields El Cerrito,	RENT E CYLINDER HOLDER FOR W	5/1/2023	\$ 5.41
5/31/2023	00889333	Shields El Cerrito,	RENT E CYLINDER RACK 06 COUN	5/1/2023	\$ 11.00
5/31/2023	00889333	Shields El Cerrito,	RENT CONCENTRATOR 5LPM	5/1/2023	\$ 37.86
5/31/2023	00889333	Shields El Cerrito,	RENT CONCENTRATOR 5LPM	5/1/2023	\$ 37.86
5/31/2023	00889333	Shields El Cerrito,	RENT CONCENTRATOR 10LPM	5/1/2023	\$ 77.15
5/31/2023	00889333	Shields El Cerrito,	RENT CONCENTRATOR 5LPM	5/1/2023	\$ 37.86
5/31/2023	00889333	Shields El Cerrito,	RENT CONCENTRATOR 5LPM	5/1/2023	\$ 37.86
5/31/2023	00889333	Shields El Cerrito,	RENT BIPAP	5/1/2023	\$ 210.91
5/31/2023	00889875	WOODS, ROBBIE	RENT BIPAP	5/1/2023	\$ 210.91
5/31/2023	00890377	GARIBAY, PHILLIP	RENT BIPAP	5/1/2023	\$ 210.91

Total: \$1,221.51

Thanking you in advance for your prompt payment.

Sincerely, Billing Department Interactive Medical Systems, Inc.

6/1/2023

Health Care Information is personal and sensitive information related to a person's healthcare. Such information is being faxed to you after appropriate authorization from the patient or under circumstances that do no require patient authorization. You, the recipient, are obligate to maintain it in a safe, secure, and confidential manner. Re-disclosure without additional patient consent or as permitted by law is prohibited. Unauthorized re-disclosure or failure to maintain confidentiality could subject you to penalties under federal and state law. If you have received

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#### **FACSIMILE**

Date:

7/2/2023

To:

SHIELDS EL CERRITO

Attn:

Business Office Manager (A / P) 3230 Carlson Blvd

El Cerrito, CA 94530 Phone: 510-525-3212 Fax: 510-525-6832

From:

**Interactive Medical Systems** 

**Billing Department** 

Phone: 888-877-0209 x200

Fax: 888-877-0212 / 310-227-8229

Regarding

Oxygen Invoices for June

Please call our customer service representative, Lynette Powell with any questions that you may have this month. She can be reached at the number listed above at extension 200, or write your discrepancy on the invoice and fax back to us at 888-877-0212.



#### Thank you for doing business with us!

#### Lynette Powell

Health Care Information is personal and sensitive information related to a person's healthcare. Such information is being faxed to you after appropriate authorization from the patient or under circumstances that do not require patient authorization. You, the recipient, are obligated to maintain it in a safe, secure, and confidential manner. Re-disclosure without additional patient consent or as permitted by law is prohibited. Unauthorized re-disclosure or failure to maintain confidentiality could subject you to penalties under federal and state law. If you have received this fax in error and/or are not the intended recipient, please call us immediately at (714) 894-5029 ext. 200 to receive instruction regarding the destruction or return of this sensitive information.

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PLEASE INCLUDE THESE NUMBERS WITH YOUR PAYMENT TO INSUIRE PROPER CREDIT

DATE	ACCT, NO	INVOICE NUMBER
6/22/2023	18313	00893057

### PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

S SHIELDS EL CERRITO
L 3230 Carlson Blvd
El Cerrito, CA 94530

S H Shields El Cerrito,
Shields El Cerrito
Shields El Cerrito
3230 Carlson Blvd
El Cerrito, CA 94530

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912100	6/22/2023	XXX CONT-EZOX SERIAL: RENTAL:	····			EZOX GAS CONTE 6/22/2023 TO 6/22		\$7.84	\$	78.40
912100	6/22/2023	XXX DEL-ND SERIAL: RENTAL:			1		FEE - STANDARD	\$17.31	\$	17.31
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ADJUSTMENT						т	\$	0.00		
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							AMOUNT THIS INVOICE INCLUDING TAX	\$	95.	71



PLEASE INCLUDE THESE NUMBERS WITH YOUR PAYMENT TO INSTURE PROPER CREDIT

DATE	ACCT. NO	INVOICE NUMBER
6/30/2023	18313	00894329

### PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

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T	El Cerrito, CA 94530

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PLEASE INCLUDE THESE INUMBERS WITH YOUR PAYMENT TO INSIDRE PROPER CREDIT

DATE	ACCT, NO	INVOICE NUMBER
6/30/2023	42767	00895181

PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, IN C. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

s F O SHIELDS EL CERRITO L 3230 Carlson Blvd El Cerrito, CA 94530 S F H WOODS, ROBBIE

Shields El Cerrito 3230 Carlson Blvd

T El Cerrito, CA 94530

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914544	6/30/2023	RNT BIPAP SERIAL:23192858696 RENTA	L:IMS34i	679	1	RENT BIPAP 6/1/2023 TO 6/3	0/2023	\$210,91	\$2	10.9
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PLEASE INCLUDE THESE NUMBERS WITH YOUR PAYMENT TO INSTURE PROPER CREDIT

DATE	ACCT. NO	INVOICE NUMBER
6/22/2023	44849	00893038

PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, IN C. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

s F
O SHIELDS EL CERRITO
3230 Carlson Blvd
El Cerrito, CA 94530

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s F
H GARIBAY, PHILLIP
Shields El Cerrito
2330 Carlson Blvd
El Cerrito, CA 94530



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912068	6/20/2023	RNT BIPAP SERIAL:J317465211337 RENTA	AL:IMS3	35540	1	RENT BIPAP 6/1/2023 TO 6/20/	2023	\$210.91	\$2	10.91
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				<u> </u>			0.1070741			
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PLEASE INCLUDE THESE NUMBERS WITH YOUR PAYMENT TO INIS URE PROPER CREDIT

DATE	ACCT. NO	INVOICE NUMBER
6/22/2023	18313	00892963

### PLEASE MAKE CHECKS PAYABLE TO

INTERACTIVE MEDICAL SYSTEMS, IN C. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

s C O SHIELDS EL CERRITO L 3230 Carlson Blvd El Cerrito, CA 94530

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3230 Carlson Blvd
El Cerrito, CA 94530

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911682	6/20/2023	RNT CON-5 SERIAL:04H766310 RENTAL:IM:	S0327	B	1	RENT CONCENTRA 6/1/2023 TO 6/20/2	100 (11)	\$37.86	\$	37.86
911682	6/20/2023	RNT CON-5 SERIAL:16BF008900 RENTAL:IM	AS255	95	1S	RENT CONCENTRA 6/1/2023 TO 6/20/2	023 V Mary	\$37.86	\$	37.86
911682	6/20/2023	RNT CON-5 SERIAL:07CSZ416246 RENTAL:	IMS08	191	1	RENT CONCENTRA 6/1/2023 TO 6/20/2	TOR SLPM	\$37.86	s	37.86
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PLEASE INCLUDE THESE NUMBERS WITH YOUR PAYMENT TO KISTURE PROPER CREDIT

DATE	ACCT. NO	INVOICE NUMBER
6/30/2023	18313	00894660

### PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, IN C. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

s F O SHIELDS EL CERRITO L 3230 Carlson Blvd El Cerrito, CA 94530

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3230 Carlson Blvd
El Cerrito, CA 94530

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14023	6/30/2023	RNT HOLDER-E SERIAL:IM01093B RENTAL:IM0109	93B		1	RENT E CYLIN 6/1/2023 TO	NDER HOLDER FOR W/C 6/30/2023	\$5.41		\$5.41	
14023	6/30/2023	RNT RACK-E-12 SERIAL:IMS00840 RENTAL:IMS00	0840		1	RENT E CYLII 6/1/2023 TO	NDER RACK 12 COUNT 6/30/2023	\$15.00	\$	15.00	
14023	6/30/2023	RNT CON-5 SERIAL:07 F021524 RENTAL:IMSC	02722	2	1	RENT CONCE 6/1/2023 TO	ENTRATOR 5LPM 6/30/2023	\$37.86	1	37.86	
914023	6/30/2023	RNT REG-H SERIAL:IMS03330 RENTAL:IMS03	3330		1	RENT H CYLI 6/1/2023 TO	NDER REGULATOR 6/30/2023	\$5.41		\$5.41	
914023	6/30/2023	RNT REG-H SERIAL:492628 RENTAL:IMS0334	14		1	RENT H CYLI 6/1/2023 TO	NDER REGULATOR 6/30/2023	\$5.41		\$5.41	
914023	6/30/2023	RNT CART-E SERIAL:JY0350014 RENTAL:IMS0	)4470	1	1	RENT E CYLI 6/1/2023 TO		\$4.62		\$4.62	
914023	6/30/2023	RNT CON-5 SERIAL:05C626671 RENTAL:IMS0	05056	3	1	RENT CONC 6/1/2023 TO	ENTRATOR SLPM TAREN 6/30/2023	\$37.86	!	\$37.86	1
914023	6/30/2023	RNT CART-H SERIAL:IMS06602 RENTAL:IMS06	6602		1	RENT H CYLI 6/1/2023 TO	NDER CART-WHEELED 6/30/2023	\$9.73	$oxed{\bot}$	\$9.73	
914023	6/30/2023	RNT RACK-E-06 SERIAL:IMS07730 RENTAL:IMS07	7730		1	RENT E CYLI 6/1/2023 TO	NDER RACK 06 COUNT 6/30/2023	\$11.00	,	\$11.00	
914023	6/30/2023	RNT HOLDER-E SERIAL:IMS08207 RENTAL:IMS08	8207		1	RENT E CYLI 6/1/2023 TO	NDER HOLDER FOR W/C 6/30/2023	\$5.41		\$5.41	
914023	6/30/2023	RNT HOLDER-E SERIAL:IMS11434 RENTAL:IMS11	1434		1	RENT E CYLI 6/1/2023 TO	NDER HOLDER FOR W/C 6/30/2023	\$5.41		\$5.41	
914023	6/30/2023	RNT RACK-E-06 SERIAL:IMS23739 RENTAL:IMS23	3739		1	RENT E CYL 6/1/2023 TO	INDER RACK 06 COUNT 6/30/2023	\$11.00		\$11.00	
914023	6/30/2023	RNT CON-5 SERIAL:17CF031765 RENTAL:IMS	S274	59	1	RENT CONC 6/1/2023 TO	ENTRATOR SLPM 2014	\$37.86		\$37.86	4
914023	6/30/2023	RNT CON-10 SERIAL:17CF037991 RENTAL:IMS	S276	24	1	RENT CONC 6/1/2023 TO	ENTRATOR 10LPM BOYE	\$77.15		\$77.15	ŀ
914023	6/30/2023	RNT CON-5 SERIAL:17IF031489 RENTAL:IMS	2854	5	1	RENT CONC 6/1/2023 TO	ENTRATOR SLPM JAVIS	\$37.86		\$37.86	Ă
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Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 59 of



PLEASE INCLUDE THESE INJUMBERS WITH YOUR PAYMENT TO INSTURE PROPER CREDIT

DATE	ACCT. NO	INVOICE NUMBER
6/30/2023	18313	00894660

#### PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

s o SHIELDS EL CERRITO 3230 Carlson Blvd El Cerrito, CA 94530 T 0

Shields El Cerrito, Н Shields El Cerrito 3230 Carlson Blvd El Cerrito, CA 94530

4	ITIALS PAGE	INI	TERMS	CALCULATE THE STATE OF THE STAT	SHIP V	TER	SLS	LOC	ER	NUMB	URCHASE ORDER	JMBER	RDER NI
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1	AMOUNT	UNIT PRICE	RIPTION	DESCR	· · · · · ·	OTY SHP'D				ITEM		G ORDER DATE	HIPPIN JMBER
	\$37.86	\$37.86	TOR 5LPM	CENTRAT D 6/30/20		1	8	IS2887	ENTAL:IV	69 RE	RNT CON-5 SERIAL:17KF0216	6/30/2023	914023
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#### MONTH END SUMMARY REPORT

THIS IS NOT A BILL. PLEASE PAY FROM YOUR INVOICES, NOT THIS SUMMARY

#### SHIELDS EL CERRITO

Dear Sir / Madam,

This summary report contains charges for the current month for the patients listed below:

Inv Date	Invoice #	Patient	Item	DOS	Amount
SHIELDS	EL CERRITO	0			
6/22/2023	00892963	Shields El Cerrito,	RENT CONCENTRATOR 5LPM	6/1/2023	\$ 37.86
6/22/2023	00892963	Shields El Cerrito,	RENT CONCENTRATOR 5LPM	6/1/2023	\$ 37.86
6/22/2023	00892963	Shields El Cerrito,	RENT CONCENTRATOR 5LPM	6/1/2023	\$ 37.86
6/22/2023	00893038	GARIBAY, PHILLIP	RENT BIPAP	6/1/2023	\$ 210.91
8/22/2023	00893057	Shields El Cerrito,	EZOX GAS CONTENT	6/22/2023	\$ 78.40
6/22/2023	00893057	Shields El Cerrito,	DELIVERY/PICKUP FEE - STANDA	6/22/2023	\$ 17.31
6/30/2023	00894329	Shields El Cerrito,	EZOX CYLINDER RENTAL	6/1/2023	\$ 43,30
6/30/2023	00894660	Shields El Cerrito,	RENT E CYLINDER HOLDER FOR W	6/1/2023	\$ 5.41
6/30/2023	00894660	Shields El Cerrito.	RENT E CYLINDER RACK 12 COUN	6/1/2023	\$ 15.00
6/30/2023	00894660	Shields El Cerrito,	RENT CONCENTRATOR 5LPM	6/1/2023	\$ 37.86
6/30/2023	00894660	Shields El Cerrito,	RENT H CYLINDER REGULATOR	6/1/2023	\$ 5 4
6/30/2023	00894660	Shields El Cerrito,	RENT H CYLINDER REGULATOR	6/1/2023	\$ 5.4
6/30/2023	00894660	Shields El Cerrito,	RENT E CYLINDER CART	6/1/2023	\$ 4.63
6/30/2023	00894660	Shields El Cerrito,	RENT CONCENTRATOR 5LPM	6/1/2023	\$ 37.8
6/30/2023	00894660	Shields El Cerrito,	RENT H CYLINDER CART-WHEELED	6/1/2023	\$ 9.7
6/30/2023	00894660	Shields El Cerrito,	RENT E CYLINDER RACK 06 COUN	6/1/2023	\$ 11.00
6/30/2023	00894660	Shields El Cerrito,	RENT E CYLINDER HOLDER FOR W	6/1/2023	\$ 5.4
6/30/2023	00894660	Shields El Cerrito,	RENT E CYLINDER HOLDER FOR W	6/1/2023	\$ 5,4
6/30/2023	00894660	Shields El Cerrito,	RENT E CYLINDER RACK 06 COUN	6/1/2023	\$ 11.0
6/30/2023	00894660	Shields El Cerrito,	RENT CONCENTRATOR 5LPM	6/1/2023	\$ 37.8
6/30/2023	00894660	Shields El Cerrito,	RENT CONCENTRATOR 10LPM	6/1/2023	\$ 77.1
6/30/2023	00894660	Shields El Cerrito,	RENT CONCENTRATOR 5LPM	6/1/2023	\$ 37.8
6/30/2023	00894660	Shields El Cerrito,	RENT CONCENTRATOR 5LPM	6/1/2023	\$ 37.8
6/30/2023	00894660	Shields El Cerrito,	RENT BIPAP	6/1/2023	\$ 210.9
6/30/2023	00895181	WOODS, ROBBIE	RENT BIPAP	6/1/2023	\$ 210.9

Total: \$1,230.17

Thanking you in advance for your prompt payment.

Sincerely, Billing Department Interactive Medical Systems, Inc.

7/2/2023

Health Care Information is personal and sensitive information related to a person's healthcare. Such information is being faxed to you after appropriate authorization from the patient or under circumstances that do no require patient authorization. You, the recipient, are obligate to maintain it in a safe, secure, and confidential manner. Re-disclosure without additional patient consent or as permitted by law is prohibited. Unauthorized re-disclosure or failure to maintain confidentiality could subject you to penalties under federal and state law. If you have received

Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 61 of



#### **FACSIMILE**

Date:

8/1/2023

To:

SHIELDS EL CERRITO

Attn:

Business Office Manager (A / P) 3230 Carlson Blvd

El Cerrito, CA 94530 Phone: 510-525-3212 Fax: 510-525-6832

From:

**Interactive Medical Systems** 

**Billing Department** 

Phone: 888-877-0209 x200

Fax: 888-877-0212 / 310-227-8229

Regarding

Oxygen Invoices for July

Please call our customer service representative, Lynette Powell with any questions that you may have this month. She can be reached at the number listed above at extension 200, or write your discrepancy on the invoice and fax back to us at 888-877-0212.

#### Thank you for doing business with us!

#### Lynette Powell

Health Care Information is personal and sensitive information related to a person's healthcare. Such information is being faxed to you after appropriate authorization from the patient or under circumstances that do not require patient authorization. You, the recipient, are obligated to maintain it in a safe, secure, and confidential manner. Re-disclosure without additional patient consent or as permitted by law is prohibited. Unauthorized re-disclosure or failure to maintain confidentiality could subject you to penalties under federal and state law. If you have received this fax in error and/or are not the intended recipient, please call us immediately at (714) 894-5029 ext. 200 to receive instruction regarding the destruction or return of this sensitive information.

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DATE	ACCT, NO	INVOICE NUMBER
7/5/2023	18313	00896570

PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

s F o SHIELDS EL CERRITO L 3230 Carlson Blvd El Cerrito, CA 94530 s F
H Shields El Cerrito,
Shields El Cerrito
3230 Carlson Blvd
El Cerrito, CA 94530

RDER N	UMBER	PURCHASE ORDER NUMBER	SLS	TER	SHIP VIA TERMS	IN	TIALS PAG
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SHIPPIN UMBER	G ORDER DATE	ITEM		OTY SHIPD	DESCRIPTION	UNIT PRICE	AMOUN
915616	7/5/2023	XXX CONT-EZOX SERIAL: RENTAL:		10	EZOX GAS CONTENT 7/5/2023 TO 7/5/2023	\$7.84	\$78.4
915616	7/5/2023	XXX DEL-ND SERIAL: RENTAL:		1	DELIVERY/PICKUP FEE - STANDARD 7/5/2023 TO 7/5/2023	\$17.31	\$17.3
					1		
	1				SUBTOT	AL	\$ 95.71
					ADJUSTME	NT	\$ 0.00
					TAX AMOU	NT	\$ 0.00
					AMOUNT THIS INVOICE INCLUDING TAX	\$	95.71

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PLEASE INCLUDE THESE NUMBERS WITH YOUR PAYMENT TO INSURE PROPER CREDIT

DATE	ACCT. NO	INVOICE NUMBER
7/24/2023	18313	00898461

PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

s F O SHIELDS EL CERRITO 3230 Carlson Blvd El Cerrito, CA 94530 Shields El Cerrito,
Shields El Cerrito
Shields El Cerrito
3230 Carlson Blvd
El Cerrito, CA 94530

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AMOUN	UNIT PRICE	DESCRIPTION	QTY SHIPD	ITEM	G ORDER DATE	SHIPPIN IUMBER
\$78.4	\$7.84	EZOX GAS CONTENT 7/20/2023 TO 7/20/2023	10	XXX CONT-EZOX SERIAL: RENTAL	7/20/2023	917617
\$17.3	\$17.31	DELIVERY/PICKUP FEE - STANDARD 7/20/2023 TO 7/20/2023	1	XXX DEL-NO SERIAL: RENTAL:	7/20/2023	917617
					7.5	
\$ 95.71	N .	SUBTOTA	L			
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95.71	\$	AMOUNT THIS INVOICE INCLUDING TAX				

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PLEASE INCLUDE THESE. NUMBERS WITH YOUR PAYMENT TO INSSURE PROPER CREDIT

DATE	ACCT, NO	INVOICE NUMBER
7/26/2023	18313	00898818

PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

s C O SHIELDS EL CERRITO L 3230 Carlson Blvd El Cerrito, CA 94530 S F
H Shields El Cerrito,
Shields El Cerrito
3230 Carlson Blvd
El Cerrito, CA 94530

SHIPPIN	G ORDER DATE	ITEM	QTY SHIPD	DESCRIPTION	UNIT PRICE	AMOUN"
917951	7/24/2023	XXX CONT-EZOX SERIAL: RENTAL:	10	EZOX GAS CONTENT 7/24/2023 TO 7/24/2023	\$7.84	\$78.4
917951	7/24/2023	XXX DEL-ND SERIAL: RENTAL:	1	DELIVERY/PICKUP FEE - STANDARD 7/24/2023 TO 7/24/2023	\$17.31	\$17.3
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				SUBTOT		\$ 95.71
				ADJUSTME TAX AMOU		\$ 0.00

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PLEASE INCLUDE THESE. NUMBERS WITH YOUR PAYMENT TO INSSURE PROPER CREDIT

DATE	ACCT, NO	INVOICE NUMBER
7/28/2023	18313	00899239

PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

s C O SHIELDS EL CERRITO 3230 Carlson Blvd El Cerrito, CA 94530 s F H Shields El Cerrito, Shields El Cerrito 3230 Carlson Blvd El Cerrito, CA 94530

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18437	7/1/2023	XXX CYL-EZOX SERIAL: RENTAL:	7	EZOX CYLINDER RENTAL 7/1/2023 TO 7/1/2023	\$4.33	\$30.3
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			_	ADJUSTME		\$ 30.31 \$ 0.00
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Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 66 of



PLEASE INCLUDE THESE INUMBERS WITH YOUR PAYMENT TO INS URE PROPER CREDIT

DATE	ACCT, NO	INVOICE NUMBER
7/31/2023	18313	00899958

PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

s F O SHIELDS EL CERRITO 3230 Carlson Blvd El Cerrito, CA 94530 s F
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Shields El Cerrito
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El Cerrito, CA 94530

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SHIPPIN JMBER	G ORDER DATE	ITEM	QTY SHIPD	DESCRIPTION	UNIT PRICE	AMOUNT	
19282	7/31/2023	RNT HOLDER-E SERIAL:IM01093B RENTAL:IM01093B	1	RENT E CYLINDER HOLDER FOR W/C 7/1/2023 TO 7/31/2023	\$5.41	\$5.41	
19282	7/31/2023	RNT RACK-E-12 SERIAL:IMS00840 RENTAL:IMS00840	1	RENT E CYLINDER RACK 12 COUNT 7/1/2023 TO 7/31/2023	\$15.00	\$15.00	
19282	7/31/2023	RNT CON-5 SERIAL:07IF021524 RENTAL:IMS02722	1	RENT CONCENTRATOR 5LPM	\$37.86	\$37.86	Ar.
319282	7/31/2023	RNT CON-5 SERIAL:04H766305 RENTAL:IMS03277 N	1	RENT CONCENTRATOR 5LPM 7/20/2023 TO 7/31/2023	\$37.86	\$37.86	CE
919282	7/31/2023	RNT REG-H SERIAL:IMS03330 RENTAL:IMS03330	1	RENT H CYLINDER REGULATOR 7/1/2023 TO 7/31/2023	\$5.41	\$5.41	
919282	7/31/2023	RNT REG-H SERIAL:492628 RENTAL:IMS03344	1	RENT H CYLINDER REGULATOR 7/1/2023 TO 7/31/2023	\$5.41	<b>\$</b> 5.41	
919282	7/31/2023	RNT CART-E SERIAL:JY0350014 RENTAL:IMS04470	1	RENT E CYLINDER CART 7/1/2023 TO 7/31/2023	\$4.62	\$4.62	
919282	7/31/2023	RNT CON-5 SERIAL:05C626671 RENTAL:IMS05056	1	RENT CONCENTRATOR 5LPM (11)-1/3	\$37.86	\$37.86	M
919282	7/31/2023	RNT CART-H SERIAL:IMS06602 RENTAL:IMS06602	1	RENT H CYLINDER CART-WHEELED 7/1/2023 TO 7/31/2023	\$9.73	\$9.73	
919282	7/31/2023	RNT CON-5 NERIAL:05ESZ331448 RENTAL:IMS07366	1	RENT CONCENTRATOR 5LPM (10014)	\$37.86	\$37.86	И
919282	7/31/2023	SERIAL:05ESZ331448 RENTAL:IMS07366		RENT E CYLINDER RACK 06 COUNT 7/1/2023 TO 7/31/2023	\$11.00	\$11.00	1
919282	7/31/2023	RNT HOLDER-E SERIAL:IMS08207 RENTAL:IMS08207	1	RENT E CYLINDER HOLDER FOR W/C 7/1/2023 TO 7/31/2023	\$5.41	\$5,41	
919282	7/31/2023	RNT HOLDER-E SERIAL:IMS11434 RENTAL:IMS11434	1	RENT E CYLINDER HOLDER FOR W/C 7/1/2023 TO 7/31/2023	\$5.41	\$5.41	
919282	7/31/2023	RNT RACK-E-06 SERIAL:IMS23739 RENTAL:IMS23739	1	RENT E CYLINDER RACK 06 COUNT 7/1/2023 TO 7/31/2023	\$11.00	\$11.00	
91 <b>92</b> 82	7/31/2023	RNT CON-5 SERIAL:17CF031765 RENTAL:IMS27459	1	RENT CONCENTRATOR 5LPM 7/1/2023 TO 7/31/2023	\$37.86	\$37.86	A
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PLEASE INCLUDE THES IE NUMBERS WITH YOUR PAYMENT TO INJSURE PROPER CREDIT

DATE	ACCT, NO	INVOICE NUMBER
7/31/2023	18313	008 99958

#### PLEASE MAKE CHECKS PAYABLE TO

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

S SHIELDS EL CERRITO
SHIELDS EL CERRITO
3230 Carlson Blvd
El Cerrito, CA 94530
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s F
H Shields El Cerrito,
Shields El Cerrito
3230 Carlson Blvd
El Cerrito, CA 94530

	G ORDER	ITEM	QTY	DESCRIPTION	UNIT PRICE	AMOUNT	1
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919282	7/31/2023	RNT CON-10 SERIAL:17CF037991 RENTAL:IMS27624	1	RENT CONCENTRATOR 10LPM 7/1/2023 TO 7/31/2023	\$77.15	\$77.15	BT
919282	7/31/2023	RNT CON-5 SERIAL:17IF031489 RENTAL:IMS28545	1	RENT CONCENTRATOR 5LPM	\$37.86	\$37.86	100
919282	7/31/2023	RNT CON-5 SERIAL:17KF021669 RENTAL:IMS28878	1	RENT CONCENTRATOR 5LPM (1) 17	\$37.86	\$37.86	Mγ
919282	7/31/2023	RNT BIPAP SERIAL:5252836 RENTAL:IMS34540	1	RENT BIPAP 7/1/2023 TO 7/31/2023	\$210.91	\$210.91	LC
				1			
				SUBTOTAL		\$ 631.48	
				ADJUSTMENT		\$ 0.00	
				TAX AMOUNT		\$ 0.00	
				AMOUNT THIS INVOICE	60	31.48	

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PLEASE INCLUDE THESE. NUMBERS WITH YOUR PAYMENT TO INSTURE PROPER CREDIT

DATE	ACCT. NO	INVOICE NUMBER
7/31/2023	42767	00900469

PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

s C O SHIELDS EL CERRITO D 3230 Carlson Blvd El Cerrito, CA 94530

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WOODS, ROBBIE Shields El Cerrito

3230 Carlson Blvd

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T El Cerrito, CA 94530

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\$ 210.91		SUBTOTAL									
\$ 0.00		ADJUSTMENT						**			
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PLEASE INCLUDE THESE NUMBERS WITH YOUR PAYMENT TO INSTURE PROPER CREDIT

DATE	ACCT, NO	INVOICE NUMBER
7/28/2023	45645	00899084

PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

S F O SHIELDS EL CERRITO 3230 Carlson Blvd El Cerrito, CA 94530 T

H ALLEN, AUDREY
Shields El Cerrito

3230 Carlson Blvd El Cerrito, CA 94530 CCM

		LT	C IMS OC	A		2
SHIPPING UMBER	DATE	ITEM	QTY SHIPD	DESCRIPTION	UNIT PRICE	AMOUN <sup>*</sup>
17208	7/19/2023	RSP 1090406 SERIAL: RENTAL:	1	AMARA GEL FULL FACE MASK WITH 7/19/2023 TO 7/19/2023	\$274.00	\$274.0
17208	7/19/2023	AGI HCG72 SERIAL: RENTAL:	1	72" CPAP/BIPAP TUBING RESUABLE 7/19/2023 TO 7/19/2023	\$30.00	\$30.0
17208	7/19/2023	RSP 312710 SERIAL: RENTAL:	1	OXY ENRICHMENT ATTACHMENT 7/19/2023 TO 7/19/2023	\$4.00	\$4.0
17208	7/19/2023	MCK 32647 SERIAL: RENTAL:	1	TUBING OXYGEN CRUSH RES 7* 7/19/2023 TO 7/19/2023	\$0.53	\$0.5
13 13 13 13				SUBTOTA		\$ 308.53
				ADJUSTMEN	_	\$ 0.00
	6200000000	tore or six or store of		TAX AMOUNT	Т	\$ 28.54

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PLEASE INCLUDE THES ELNUMBERS WITH YOUR PAYMENT TO INSURE PROPER CREDIT

DATE	ACCT, NO	INVOICE NUMBER
7/31/2023	45645	009O1251

### PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

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0	SHIELDS EL CERRITO	H ALLEN, AUDREY	
D	3230 Carlson Blvd El Cerrito, CA 94530	I Shields El Cerrito 3230 Carlson Blvd	Och
T O	27 COTTICS, C7 CO 4000	T El Cerrito, CA 945	-

RDER N	OINIDELL	PURCHASE ORDER NUMBE	LTC IMS		R SHIP VIA TERMS	INI	TIALS PAG
SHIPPIN UMBER	IG ORDER DATE	ITEM		QTY SHIP'D	DESCRIPTION	UNIT PRICE	AMOUN'
20575	7/31/2023	RNT BIPAP-ST SERIAL:J325344048464 F	RENTAL:IMS35769	1	RENT BIPAP ST 7/19/2023 TO 7/31/2023	\$243.36	\$243.3
					10		
					9		
					SUBTOTAL		\$ 243.36
					ADJUSTMENT		\$ 0.00
					TAX AMOUNT		\$ 0.00
					AMOUNT THIS INVOICE INCLUDING TAX	\$24	43.36



#### MONTH END SUMMARY REPORT

THIS IS NOT A BILL. PLEASE PAY FROM YOUR INVOICES, NOT THIS SUMMARY

#### SHIELDS EL CERRITO

Dear Sir / Madam,

This summary report contains charges for the current month for the patients listed below:

Inv Date	Invoice #	Patient	Item	DOS	Amount
SHIELDS	EL CERRITO				
7/5/2023	00896570	Shields El Cerrito,	EZOX GAS CONTENT	7/5/2023	\$ 78.40
7/5/2023	00896570	Shields El Cerrito,	DELIVERY/PICKUP FEE - STANDA	7/5/2023	\$ 17.31
7/24/2023	00898461	Shields El Cerrito,	EZOX GAS CONTENT	7/20/2023	\$ 78.40
7/24/2023	00898461	Shields El Cerrito,	DELIVERY/PICKUP FEE - STANDA	7/20/2023	\$ 17.31
7/26/2023	00898818	Shields El Cerrito,	EZOX GAS CONTENT	7/24/2023	\$ 78.40
7/26/2023	00898818	Shields El Cerrito,	DELIVERY/PICKUP FEE - STANDA	7/24/2023	\$ 17.31
7/28/2023	00899084	ALLEN, AUDREY	AMARA GEL FULL FACE MASK WIT	7/19/2023	\$ 299.35
7/28/2023	00899084	ALLEN, AUDREY	72" CPAP/BIPAP TUBING RESUAB	7/19/2023	\$ 32.78
7/28/2023	00899084	ALLEN, AUDREY	OXY ENRICHMENT ATTACHMENT	7/19/2023	\$ 4.37
7/28/2023	00899084	ALLEN, AUDREY	TUBING OXYGEN CRUSH RES 7"	7/19/2023	\$ 0.58
7/28/2023	00899239	Shields El Cerrito,	EZOX CYLINDER RENTAL	7/1/2023	\$ 30.31
7/31/2023	00899958	Shields El Cerrito,	RENT E CYLINDER HOLDER FOR W	7/1/2023	\$ 5.4
7/31/2023	00899958	Shields El Cerrito,	RENT E CYLINDER RACK 12 COUN	7/1/2023	\$ 15.00
7/31/2023	00899958	Shields El Cerrito,	RENT CONCENTRATOR 5LPM	7/1/2023	\$ 37.86
7/31/2023	00899958	Shields El Cerrito,	RENT CONCENTRATOR 5LPM	7/20/2023	\$ 37.86
7/31/2023	00899958	Shields El Cerrito,	RENT H CYLINDER REGULATOR	7/1/2023	\$ 5,41
7/31/2023	00899958	Shields El Cerrito,	RENT H CYLINDER REGULATOR	7/1/2023	\$ 5,41
7/31/2023	00899958	Shields El Cerrito,	RENT E CYLINDER CART	7/1/2023	\$ 4.62
7/31/2023	00899958	Shields El Cerrito,	RENT CONCENTRATOR 5LPM	7/1/2023	\$ 37.86
7/31/2023	00899958	Shields El Cerrito,	RENT H CYLINDER CART-WHEELED	7/1/2023	\$ 9.73
7/31/2023	00899958	Shields El Cerrito,	RENT CONCENTRATOR 5LPM	7/20/2023	\$ 37,86
7/31/2023	00899958	Shields El Cerrito,	RENT E CYLINDER RACK 06 COUN	7/1/2023	\$ 11.00
7/31/2023	00899958	Shields El Cerrito,	RENT E CYLINDER HOLDER FOR W	7/1/2023	\$ 5.4
7/31/2023	00899958	Shields El Cerrito,	RENT E CYLINDER HOLDER FOR W	7/1/2023	\$ 5.4
7/31/2023	00899958	Shields El Cerrito,	RENT E CYLINDER RACK 06 COUN	7/1/2023	\$ 11.00
7/31/2023	00899958	Shields El Cerrito,	RENT CONCENTRATOR 5LPM	7/1/2023	\$ 37.86

CONTINUED ON NEXT PAGE

Health Care Information is personal and sensitive information related to a person's healthcare. Such information is being faxed to you after appropriate authorization from the patient or under circumstances that do no require patient authorization. You, the recipient, are obligate to maintain it in a safe, secure, and confidential manner. Re-disclosure without additional patient consent or as permitted by law is prohibited. Unauthorized re-disclosure or failure to maintain confidentiality could subject you to penalties under federal and state law. If you have received



### MONTH END SUMMARY REPORT

THIS IS NOT A BILL. PLEASE PAY FROM YOUR INVOICES, NOT THIS SUMMARY

#### SHIELDS EL CERRITO

#### CONTINUED FROM PREVIOUS PAGE

Inv Date	Invoice #	Patient	Item	DOS	Amount
7/31/2023	00899958	Shields El Cerrito,	RENT CONCENTRATOR 10LPM	7/1/2023	\$ 77.15
7/31/2023	00899958	Shields El Cerrito,	RENT CONCENTRATOR 5LPM	7/1/2023	\$ 37.86
7/31/2023	00899958	Shields El Cerrito,	RENT CONCENTRATOR 5LPM	7/1/2023	\$ 37.86
7/31/2023	00899958	Shields El Cerrito,	RENT BIPAP	7/1/2023	\$ 210.91
7/31/2023	00900469	WOODS, ROBBIE	RENT BIPAP	7/1/2023	\$ 210.91
7/31/2023	00901251	ALLEN, AUDREY	RENT BIPAP ST	7/19/2023	\$ 243.36

Total: \$1,740.26

Thanking you in advance for your prompt payment.

Sincerely, Billing Department Interactive Medical Systems, Inc.

8/1/2023

Health Care Information is personal and sensitive information related to a person's healthcare. Such information is being faxed to you after

Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 73 of



### **FACSIMILE**

Date:

9/1/2023

To:

SHIELDS EL CERRITO

Attn:

Business Office Manager (A / P) 3230 Carlson Blvd

El Cerrito, CA 94530 Phone: 510-525-3212 Fax: 510-525-6832

From:

**Interactive Medical Systems** 

**Billing Department** 

Phone: 888-877-0209 x200

Fax: 888-877-0212 / 310-227-8229

Regarding

**Oxygen Invoices for August** 

Please call our customer service representative, Lynette Powell with any questions that you may have this month. She can be reached at the number listed above at extension 200, or write your discrepancy on the invoice and fax back to us at 888-877-0212.

### Thank you for doing business with us!

#### Lynette Powell

Health Care Information is personal and sensitive information related to a person's healthcare. Such information is being faxed to you after appropriate authorization from the patient or under circumstances that do not require patient authorization. You, the recipient, are obligated to maintain it in a safe, secure, and confidential manner. Re-disclosure without additional patient consent or as permitted by law is prohibited. Unauthorized re-disclosure or failure to maintain confidentiality could subject you to penalties under federal and state law. If you have received this fax in error and/or are not the intended recipient, please call us immediately at (714) 894-5029 ext. 200 to receive instruction regarding the destruction or return of this sensitive information.



PLEASE INCLUDE THESE NUMBERS WITH YOUR PAYMENT TO INSURE PROPER CREDIT

DATE	ACCT. NO	INVOICE NUMBER
8/15/2023	18313	00902900

PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

s F O SHIELDS EL CERRITO 3230 Carlson Blvd El Cerrito, CA 94530 s F
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Shields El Cerrito
3230 Carlson Blvd
T El Cerrito, CA 94530

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922104	8/14/2023	XXX CONT-EZOX SERIAL: RENTAL:	9	EZOX GAS CONTENT 8/14/2023 TO 8/14/2023	\$7.84	\$70.5
922104	8/14/2023	XXX DEL-ND SERIAL: RENTAL:	1	DELIVERY/PICKUP FEE - STANDARD 8/14/2023 TO 8/14/2023	\$17.31	\$17.3
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				SUBTOTAL	+	\$ 87.87
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Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 75 of



PLEASE INCLUDE THESE. NUMBERS WITH YOUR PAYMENT TO INSURE PROPER CREDIT

DATE	ACCT, NO	INVOICE NUMBER	
8/30/2023	18313	00904882	

PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

s F O SHIELDS EL CERRITO 2330 Carlson Blvd El Cerrito, CA 94530

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924142	8/30/2023	XXX CONT-EZOX SERIAL: RENTAL:		1	12	EZOX GAS CONTENT 8/30/2023 TO 8/30/2023	\$7.84	\$94.0
924142	8/30/2023	XXX DEL-ND SERIAL: RENTAL:			1	DELIVERY/PICKUP FEE - STANDARD 8/30/2023 TO 8/30/2023	\$17.31	\$17.3
	1000 (PAGE)			$\perp$		SUBTOTAL		
	-		100000		_	ADJUSTMENT	_	\$ 111.39 \$ 0.00
N/					_	TAX AMOUNT		\$ 0.00
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DATE	ACCT, NO	INVOICE NUMBER
8/31/2023	18313	00905405

PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

s C o SHIELDS EL CERRITO 3230 Carlson Blvd El Cerrito, CA 94530

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Shields El Cerrito
2330 Carlson Blvd
El Cerrito, CA 94530

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SHIPPING JMBER	G ORDER DATE	ITEM	QTY SHIP'D	DESCRIPTION	UNIT PRICE	AMOUN
24700	8/1/2023	XXX CYL-EZOX SERIAL: RENTAL:	12	EZOX CYLINDER RENTAL 8/1/2023 TO 8/1/2023	\$4.33	\$51.9
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				SUBTOT	-	\$ 51.96
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				AMOUNT THIS INVOICE INCLUDING TAX		\$ 0.00 <b>51.96</b>

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PLEASE INCLUDE THESE INUMBERS WITH YOUR PAYMENT TO INSTURE PROPER CREDIT

DATE	ACCT: NO	INVOICE NUMBER
8/31/2023	18313	00905621

### PLEASE MAKE CHECKS PAYABLE TO

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

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El Cerrito, CA 94530

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HIPPING MBER	G ORDER DATE	ITEM	QTY SHIP'D	DESCRIPTION	UNIT PRICE	AMOUNT	
25113	8/31/2023	RNT HOLDER-E SERIAL:IM01093B RENTAL:IM01093B	1	RENT E CYLINDER HOLDER FOR W/C 8/1/2023 TO 8/31/2023	\$5.41	\$5.41	
25113	8/31/2023	RNT RACK-E-12 SERIAL:IMS00840 RENTAL:IMS00840	1	RENT E CYLINDER RACK 12 COUNT 8/1/2023 TO 8/31/2023	\$15.00	\$15.00	
25113	8/31/2023	RNT CON-5 SERIAL:07IF021524 RENTAL:IMS02722	1	RENT CONCENTRATOR 5LPM   67/1   8/1/2023 TO 8/31/2023	\$37.86	\$37.86	7-12
25113	8/31/2023	RNT CON-5 SERIAL:04H766305 RENTAL:IMS03277	1	RENT CONCENTRATOR 5LPM 8/1/2023 TO 8/31/2023	\$37.86	\$37.86	Hu
25113	8/31/2023	RNT REG-H SERIAL:IMS03330 RENTAL:IMS03330	1	RENT H CYLINDER REGULATOR 8/1/2023 TO 8/31/2023	\$5.41	<b>\$</b> 5.41	
25113	8/31/2023	RNT REG-H SERIAL:492628 RENTAL:IMS03344	1	RENT H CYLINDER REGULATOR 8/1/2023 TO 8/31/2023	\$5.41	\$5.41	
25113	8/31/2023	RNT CART-E SERIAL:JY0350014 RENTAL:IMS04470	1	RENT E CYLINDER CART 8/1/2023 TO 8/31/2023	\$4.62	\$4.62	
25113	8/31/2023	RNT CON-5 SERIAL:05C626671 RENTAL:IMS05056	1	RENT CONCENTRATOR 5LPM F14 117	\$37.86	\$37.86	ÁA
25113	8/31/2023	RNT CART-H SERIAL:IMS06602 RENTAL:IMS06602	1	RENT H CYLINDER CART-WHEELED 8/1/2023 TO 8/31/2023	\$9.73	\$9.73	
25113	8/31/2023	RNT CON-5 SERIAL:05ESZ331448 RENTAL:IMS07366	1	RENT CONCENTRATOR SLPM ( by eye	\$37.86	\$37.86	WH
25113	8/31/2023	RNT RACK-E-06 SERIAL:IMS07730 RENTAL:IMS07730	1	RENT E CYLINDER RACK 06 COUNT 8/1/2023 TO 8/31/2023	\$11.00	\$11.00	
25113	8/31/2023	RNT HOLDER-E SERIAL:IMS08207 RENTAL:IMS08207	1	RENT E CYLINDER HOLDER FOR W/C 8/1/2023 TO 8/31/2023	\$5.41	\$5.41	
25113	8/31/2023	RNT HOLDER-E SERIAL:IMS11434 RENTAL:IMS11434	1	RENT E CYLINDER HOLDER FOR W/C 8/1/2023 TO 8/31/2023	\$5.41	\$5.41	
25113	8/31/2023	RNT RACK-E-06 SERIAL:IMS23739 RENTAL:IMS23739	1	RENT E CYLINDER RACK 06 COUNT 8/1/2023 TO 8/31/2023	\$11.00	\$11.00	
25113	8/31/2023	RNT CON-5 SERIAL:17CF031765 RENTAL:IMS27459	1	RENT CONCENTRATOR 5LPM 2014	\$37.86	\$37.86	10
				SUBTOTAL	<del></del>		4
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				TAX AMOUNT	Г		-

Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 78 of



PLEASE INCLUDE THESE NUMBERS WITH YOUR PAYMENT TO INSURE PROPER CREDIT

DATE	ACCT. NO	INVOICE NUMBER
8/31/2023	18313	00907271

PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

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HPPINO MBER	G ORDER DATE	ITEM	QTY SHIPD	DESCRIPTION	UNIT PRICE	AMOUNT
6447	8/31/2023	RNT CON-5 SERIAL:04D341236 RENTAL:IMS02977	1	RENT CONCENTRATOR SLPM Spring 8/29/2023 TO 8/31/2023	\$37.86	\$37.86
6447	8/31/2023	RNT CON-5 SERIAL:08BF020565 RENTAL:IMS09494	1	RENT CONCENTRATOR 5LPM   1012-1	<b>\$</b> 37.86	\$37.86
6447	8/31/2023	RNT CON-5 SERIAL:16HF033257 RENTAL:IMS26744	1	RENT CONCENTRATOR 5LPM 8/29/2023 TO 8/31/2023	\$37.86	\$37.86
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				SUBTOTAL		\$ 113.58
				ADJUSTMENT	+	\$ 0.00
				TAX AMOUNT		\$ 0.00
				AMOUNT THIS INVOICE INCLUDING TAX	\$1	13.58



PLEASE INCLUDE THES E NUMBERS WITH YOUR PAYMENT TO IN SURE PROPER CREDIT

DATE	ACCT, NO	INVOICE NUMBER
8/31/2023	18313	009O5621

### PLEASE MAKE CHECKS PAYABLE TO

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

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(	\$77.15	\$77.15	RENT CONCENTRATOR 10LPM 3000000000000000000000000000000000000	1	RNT CON-10 SERIAL:17CF037991 RENTAL:IMS27624	8/31/2023	925113
	\$37.86	\$37.86	RENT CONCENTRATOR 5LPM (8/1/2023 TO 8/31/2023	1	RNT CON-5 SERIAL:17IF031489 RENTAL:IMS28545	8/31/2023	925113
7	\$37.86	\$37.86	RENT CONCENTRATOR 5LPM	1	RNT CON-5 SERIAL:17KF021669 RENTAL:IMS28878	8/31/2023	925113
1	\$210.91	\$210.91	RENT BIPAP 8/1/2023 TO 8/31/2023	1	RNT BIPAP SERIAL:5252836 RENTAL:IMS34540	8/31/2023	925113
Address of the control of the contro							
	\$ 631.48		SUBTOTAL				0 E 10
-	\$ 0.00		ADJUSTMENT				
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Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 80 of



PLEASE INCLUDE THESE. NUMBERS WITH YOUR PAYMENT TO INSURE PROPER CREDET.

DATE	ACCT, NO	INVOICE NUMBER
8/31/2023	42767	00906114

PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

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O SHIELDS EL CERRITO
L 3230 Carlson Blvd
El Cerrito, CA 94530

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S WOODS, ROBBIE
Shields El Cerrito
3230 Carlson Blvd
El Cerrito, CA 94530

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925606	8/31/2023	RNT BIPAP SERIAL:23192858696 RENTAL:IMS34679	1	RENT BIPAP 8/1/2023 TO 8/31/2023	\$210.91	\$210.9
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				SUBTOTAL		\$ 210.91
				ADJUSTMENT		\$ 0.00
<u>.</u>				TAX AMOUNT AMOUNT THIS INVOICE INCLUDING TAX		\$ 0.00 10.91

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### MONTH END SUMMARY REPORT

## THIS IS NOT A BILL. PLEASE PAY FROM YOUR INVOICES, NOT THIS SUMMARY

#### SHIELDS EL CERRITO

Dear Sir / Madam,

This summary report contains charges for the current month for the patients listed below:

Inv Date	Invoice #	Patient	item	DOS	Amount
SHIELDS	EL CERRITO	)			
8/15/2023	00902900	Shields El Cerrito,	EZOX GAS CONTENT	8/14/2023	\$ 70,56
8/15/2023	00902900	Shields El Cerrito,	DELIVERY/PICKUP FEE - STANDA	8/14/2023	\$ 17,31
8/30/2023	00904882	Shields El Cerrito,	EZOX GAS CONTENT	8/30/2023	\$ 94.08
8/30/2023	00904882	Shields El Cerrito,	DELIVERY/PICKUP FEE - STANDA	8/30/2023	\$ 17,31
8/31/2023	00905405	Shields El Cerrito	EZOX CYLINDER RENTAL	8/1/2023	\$ 51,96
8/31/2023	00905621	Shields El Cerrito	RENT E CYLINDER HOLDER FOR W	8/1/2023	\$ 5,41
8/31/2023	00905621	Shields El Cerrito,	RENT E CYLINDER RACK 12 COUN	8/1/2023	\$ 15.00
8/31/2023	00905621	Shields El Cerrito,	RENT CONCENTRATOR 5LPM	8/1/2023	\$ 37.86
8/31/2023	00905621	Shields El Cerrito,	RENT CONCENTRATOR 5LPM	8/1/2023	\$ 37,86
8/31/2023	00905621	Shields El Cerrito,	RENT H CYLINDER REGULATOR	8/1/2023	\$ 5,41
3/31/2023	00905621	Shields El Cerrito,	RENT H CYLINDER REGULATOR	8/1/2023	\$ 5.41
3/31/2023	00905621	Shields El Cerrito,	RENT E CYLINDER CART	8/1/2023	\$ 4.62
8/31/2023	00905621	Shields El Cerrito,	RENT CONCENTRATOR 5LPM	8/1/2023	\$ 37.86
3/31/2023	00905621	Shields El Cerrito,	RENT H CYLINDER CART-WHEELED	8/1/2023	\$ 9,73
3/31/2023	00905621	Shields El Cerrito,	RENT CONCENTRATOR 5LPM	8/1/2023	\$ 37.86
3/31/2023	00905621	Shields El Cerrito,	RENT E CYLINDER RACK 06 COUN	8/1/2023	\$ 11.00
8/31/2023	00905621	Shields El Cerrito,	RENT E CYLINDER HOLDER FOR W	8/1/2023	\$ 5.41
8/31/2023	00905621	Shields El Cerrito,	RENT E CYLINDER HOLDER FOR W	8/1/2023	\$ 5.41
8/31/2023	00905621	Shields El Cerrito,	RENT E CYLINDER RACK 06 COUN	8/1/2023	\$ 11.00
8/31/2023	00905621	Shields El Cerrito,	RENT CONCENTRATOR 5LPM	8/1/2023	\$ 37.86
8/31/2023	00905621	Shields El Cerrito,	RENT CONCENTRATOR 10LPM	8/1/2023	\$ 77.15
8/31/2023	00905621	Shields El Cerrito,	RENT CONCENTRATOR 5LPM	8/1/2023	\$ 37.86
8/31/2023	00905621	Shields El Cerrito,	RENT CONCENTRATOR 5LPM	8/1/2023	\$ 37.86
8/31/2023	00905621	Shields El Cerrito,	RENT BIPAP	8/1/2023	\$ 210.91
8/31/2023	00906114	WOODS, ROBBIE	RENT BIPAP	8/1/2023	\$ 210,91
8/31/2023	00907271	Shields El Cerrito,	RENT CONCENTRATOR 5LPM	8/29/2023	\$ 37.86

CONTINUED ON NEXT PAGE

Health Care Information is personal and sensitive information related to a person's healthcare. Such information is being faxed to you after appropriate authorization from the patient or under circumstances that do no require patient authorization. You, the recipient, are obligate to maintain it in a safe, secure, and confidential manner. Re-disclosure without additional patient consent or as permitted by law is prohibited. Unauthorized re-disclosure or failure to maintain confidentiality could subject you to cenalties under federal and state law. If you have received

Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 82 of



### MONTH END SUMMARY REPORT

THIS IS NOT A BILL. PLEASE PAY FROM YOUR INVOICES, NOT THIS SUMMARY

#### SHIELDS EL CERRITO

#### CONTINUED FROM PREVIOUS PAGE

Inv Date	invoice #	invoice # Patient Item		DOS	Amount
8/31/2023	00907271	Shields El Cerrito,	RENT CONCENTRATOR 5LPM	8/29/2023	\$ 37.86
8/31/2023	00907271	Shields El Cerrito,	RENT CONCENTRATOR 5LPM	8/29/2023	\$ 37.86
				Total:	<b>\$</b> 1 207 19

Thanking you in advance for your prompt payment.

Sincerely, Billing Department Interactive Medical Systems, Inc.

9/1/2023

Health Care Information is personal and sensitive information related to a person's healthcare. Such information is being faxed to you after appropriate authorization from the national or under circumstances that do no require national authorization. You, the recipient, are obligate to

Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 83 of



### **FACSIMILE**

Date:

6/1/2023

To:

SHIELDS RICHMOND

Attn:

Business Office Manager (A / P) 1919 Cutting Blvd

Richmond, CA 94804 Phone: 510-233-8513 Fax: 510-236-7589

From:

**Interactive Medical Systems** 

**Billing Department** 

Phone: 888-877-0209 x200

Fax: 888-877-0212 / 310-227-8229

Regarding

Oxygen Invoices for May

Please call our customer service representative, Lynette Powell with any questions that you may have this month. She can be reached at the number listed above at extension 200, or write your discrepancy on the invoice and fax back to us at 888-877-0212.

### Thank you for doing business with us!

#### Lynette Powell

Health Care Information is personal and sensitive information related to a person's healthcare. Such information is being faxed to you after appropriate authorization from the patient or under circumstances that do not require patient authorization. You, the recipient, are obligated to maintain it in a safe, secure, and confidential manner. Re-disclosure without additional patient consent or as permitted by law is prohibited. Unauthorized re-disclosure or failure to maintain confidentiality could subject you to penalties under federal and state law. If you have received this fax in error and/or are not the intended recipient, please call us immediately at (714) 894-5029 ext. 200 to receive instruction regarding the destruction or return of this sensitive information...

Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 84 of



PLEASE INCLUDE THESE. NUMBERS WITH YOUR PAYMENT TO INSURE PROPER CREDIT

DATE	DATE ACCT. NO INVOICE NUM					
5/18/2023	18312	00887249				

PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

S SHIELDS RICHMOND
L 1919 Cutting Blvd
Richmond, CA 94804

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H Shields Richmond,
Shields Richmond
1919 Cutting Blvd
Richmond, CA 94804

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906216	5/17/2023	XXX CONT-EZOX SERIAL: RENTAL:			15	EZOX GAS CON 5/17/2023 TO 5/		\$7.84	\$117.60
906216	5/17/2023	XXX DEL-ND SERIAL: RENTAL:			1	DELIVERY/PICKI 5/17/2023 TO 5/	JP FEE - STANDARD 17/2023	\$17,31	<b>\$</b> 17.3 <sup>-</sup>
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	<u> </u>						AMOUNT THIS INVOICE INCLUDING TAX		34.91

Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 85 of



PLEASE INCLUDE THESE. NUMBERS WITH YOUR PAYMENT TO INSSURE PROPER CREDIT

DATE	ACCT, NO	INVOICE NUMBER
5/31/2023	18312	00889029

PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

S FOR SHIELDS RICHMOND
L 1919 Cutting Blvd
Richmond, CA 94804

S F
H Shields Richmond,
Shields Richmond
1919 Cutting Blvd
T Richmond, CA 94804

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SHIPPIN UMBER	G ORDER DATE	ITEM	SH	IIP'D	DES	CRIPTION	UNIT PRICE	AMOUN
908015	5/1/2023	XXX CYL-EZOX SERIAL: RENTAL:		50	EZOX CYLINDER F 5/1/2023 TO 5/1/2		\$4.33	\$216.5
908015	5/1/2023	XXX CYL-H SERIAL: RENTAL:		2	H CYLINDER REN' 5/1/2023 TO 5/1/2		\$5.41	\$10.82
	·	1				SUBTOTA	L	\$ 227.32
						ADJUSTMEN	т	\$ 0.00
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Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 86 of



PLEASE INCLUDE THESE. NUMBERS WITH YOUR PAYMENT TO INSLURE PROPER CREDIT

DATE	ACCT. NO	INVOICE NUMBER
5/30/2023	18312	00888354

PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

s C o SHIELDS RICHMOND 1919 Cutting Blvd Richmond, CA 94804

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Shields Richmond, Shields Richmond 1919 Cutting Blvd

Richmond, CA 94804

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6515	5/26/2023	RNT CON-5 SERIAL:17BF021217 RENTAL:IMS2705	7	1	RENT CONCE 5/1/2023 TO 5	NTRATOR 5LPM	O114 \$37	.86	\$37.86
6515	5/26/2023	RNT CON-5 SERIAL:041931573 RENTAL:IMS03962		1	RENT CONCE 5/1/2023 TO 5	NTRATOR 5LPM	Corker \$3	7.86	\$37.86
6515	5/26/2023	RNT CON-5 SERIAL:02K189482 RENTAL:IMS00606		1	RENT CONCE 5/1/2023 TO 5	NTRATOR 5LPM 5/26/2023	(125D) \$3	7.86	\$37.86
6515	5/26/2023	RNT CON-5 SERIAL:17BF021223 RENTAL:IMS2706	5	1	RENT CONCE 5/1/2023 TO 5	NTRATOR 5LPM 5/26/2023 ∨	Wirk \$3	7.86	\$37.86
6515	5/26/2023	RNT CON-5 SERIAL:17HF011791 RENTAL:IMS2831	7	1	RENT CONCE 5/1/2023 TO 5	NTRATOR 5LPM 5/26/2023	Down his \$3	7.86	\$37.86
6515	5/26/2023	RNT CON-5 SERIAL:19DF007997 RENTAL:IMS3275	55	1	RENT CONCE 5/1/2023 TO 5	NTRATOR 5LPM 5/26/2023	10 mile \$3	7.86	\$37.86
6515	5/26/2023	RNT CON-5 SERIAL:16BF008888 RENTAL:IMS2496	57	1	RENT CONCE 5/1/2023 TO 5	NTRATOR 5LPM 5/26/2023	Bulling \$3	7.86	\$37.86
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							SUBTOTAL		\$ 265.02
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Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 87 of



PLEASE INCLUDE THESE NUMBERS WITH YOUR PAYMENT TO INSTURE PROPER CREDIT

DATE	ACCT, NO	INVOICE NUMBER
5/31/2023	18312	00889332

PLEASE MAKE CHECKS PAYARLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

s F o SHIELDS RICHMOND 1919 Cutting Blvd Richmond, CA 94804

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Richmond, CA 94804

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SHIPPIN JMBER	G ORDER DATE	ITEM	QTY SHIP'D	DESCRIPTION	UNIT PRICE	AMOUNT
08547	5/31/2023	RNT HOLDER-E SERIAL:IM00475B RENTAL:IM00475B	1	RENT E CYLINDER HOLDER FOR W/C 5/1/2023 TO 5/31/2023	\$5.41	\$5.41
08547	5/31/2023	RNT HOLDER-E SERIAL: M00479B RENTAL: IM00479B	1	RENT E CYLINDER HOLDER FOR W/C 5/1/2023 TO 5/31/2023	\$5,41	\$5,41
08547	5/31/2023	RNT HOLDER-E SERIAL:IM00485B RENTAL:IM00485B		RENT E CYLINDER HOLDER FOR W/C 5/1/2023 TO 5/31/2023	\$5.41	\$5,41
08547	5/31/2023	NT CON-5 ERIAL:04F536678 RENTAL:IMS03009		RENT CONCENTRATOR 5LPM 17 /1 /1 /1 /1 /1 /1 /1 /1 /1 /1 /1 /1 /1	\$37.86	\$37.86
08547	5/31/2023	RNT CON-5 SERIAL:04D341238 RENTAL:IMS03372	1	RENT CONCENTRATOR 5LPM	\$37,86	\$37.86
08547	5/31/2023	RNT CON-5 SERIAL:04G727956 RENTAL:IMS03474	1	RENT CONCENTRATOR 5LPM	\$37.86	\$37.86
08547	5/31/2023	RNT CON-5 SERIAL:041933237 RENTAL:IMS03978	1	RENT CONCENTRATOR 5LPM	\$37.86	\$37.86
08547	5/31/2023	RNT COMP SERIAL:0050603 RENTAL:IMS06311	1	RENT COMPRESSOR 50PSI (7) (7) (7) (7) (7) (7) (7) (7) (7) (7)	\$37.86	\$37.86
008547	5/31/2023	RNT CON-5 SERIAL:07BSZ410935 RENTAL:IMS08916	1	RENT CONCENTRATOR 5LPM PEZ	\$37.86	\$37.86
08547	5/31/2023	RNT CON-5 SERIAL:09LSZ621159 RENTAL:IMS16042	1	RENT CONCENTRATOR SLPM	\$37.86	<b>\$</b> 37.86
908547	5/31/2023	RNT COMP SERIAL:00004148 RENTAL:IMS18306	1	RENT COMPRESSOR 50PS 7-014	\$37.86	\$37.86
908547	5/31/2023	RNT HOLDER-E SERIAL:IMS21277 RENTAL:IMS21277	1	RENT E CYLINDER HOLDER FOR W/C 5/1/2023 TO 5/31/2023	\$5,41	\$5.41
908547	5/31/2023	RNT CON-10 SERIAL:16KF012872 RENTAL:IMS26634	1	RENT CONCENTRATOR 10LPM Person 5/1/2023 TO 5/31/2023	\$77.15	\$77.15
908547	5/31/2023	RNT CON-10 SERIAL:17CF037987 RENTAL:IMS27627	1	RENT CONCENTRATOR 10LPM 1920	\$77.15	\$77.15
908547	5/31/2023	RNT HOLDER-E SERIAL:IMS30036 RENTAL:IMS30036	1	RENT E CYLINDER HOLDER FOR W/C 5/1/2023 TO 5/31/2023	\$5.41	\$5.41
				SUBTOTAL ADJUSTMENT		
				TAX AMOUNT AMOUNT THIS INVOICE		Page



PLEASE INCLUDE THESE NUMBERS WITH YOUR PAYMENT TO INSSURE PROPER CREDIT

DATE	ACCT, NO	INVOICE NUMBER
5/31/2023	18312	00889332

PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

SHIELDS RICHMOND
SHIELDS RICHMOND
1919 Cutting Blvd
Richmond, CA 94804

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Shields Richmond,
Shields Richmond
1919 Cutting Blvd
Richmond, CA 94804

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908547	5/31/2023	RNT HOLDER-E SERIAL:IMS30041 RENTAL:IMS30041	1	RENT E CYLINDER HOLDER FOR W/C 5/1/2023 TO 5/31/2023	\$5.41	\$5.4
908547	5/31/2023	RNT HOLDER-E SERIAL:IMS30044 RENTAL:IMS30044	1	RENT E CYLINDER HOLDER FOR W/C 5/1/2023 TO 5/31/2023	\$5.41	\$5.4
08547	5/31/2023	RNT HOLDER-E SERIAL:IMS30049 RENTAL:IMS30049	1	RENT E CYLINDER HOLDER FOR W/C 5/1/2023 TO 5/31/2023	\$5.41	\$5.4
908547	5/31/2023	RNT CON-5 SERIAL:20BF015339 RENTAL:1MS33277	1	RENT CONCENTRATOR 5LPM 111-11-11-11-11-11-11-11-11-11-11-11-11	\$37.86	\$37.8
				SUBTOTAL		\$ 538.32
				ADJUSTMENT	<del>-</del>	\$ 0.00
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### MONTH END SUMMARY REPORT

THIS IS NOT A BILL. PLEASE PAY FROM YOUR INVOICES, NOT THIS SUMMARY

#### SHIELDS RICHMOND

Dear Sir / Madam,

This summary report contains charges for the current month for the patients listed below:

Inv Date	Invoice #	Patient	Item	DOS	Amount
SHIELDS	RICHMOND				
5/18/2023	00887249	Shields Richmond,	EZOX GAS CONTENT	5/17/2023	\$ 117.60
5/18/2023	00887249	Shields Richmond,	DELIVERY/PICKUP FEE - STANDA	5/17/2023	\$ 17.31
5/30/2023	00888354	Shields Richmond,	RENT CONCENTRATOR 5LPM	5/1/2023	\$ 37.86
5/30/2023	00888354	Shields Richmond,	RENT CONCENTRATOR 5LPM	5/1/2023	\$ 37.86
5/30/2023	00888354	Shields Richmond,	RENT CONCENTRATOR 5LPM	5/1/2023	\$ 37.86
5/30/2023	00888354	Shields Richmond,	RENT CONCENTRATOR 5LPM	5/1/2023	\$ 37.86
5/30/2023	00888354	Shields Richmond,	RENT CONCENTRATOR 5LPM	5/1/2023	\$ 37.86
5/30/2023	00888354	Shields Richmond,	RENT CONCENTRATOR 5LPM	5/1/2023	\$ 37.86
5/30/2023	00888354	Shields Richmond,	RENT CONCENTRATOR 5LPM	5/1/2023	\$ 37.86
5/31/2023	00889029	Shields Richmond,	EZOX CYLINDER RENTAL	5/1/2023	\$ 216.50
5/31/2023	00889029	Shields Richmond,	H CYLINDER RENTAL	5/1/2023	\$ 10.82
5/31/2023	00889332	Shields Richmond	RENT E CYLINDER HOLDER FOR W	5/1/2023	\$ 5.41
5/31/2023	00889332	Shields Richmond,	RENT E CYLINDER HOLDER FOR W	5/1/2023	\$ 5.41
5/31/2023	00889332	Shields Richmond,	RENT E CYLINDER HOLDER FOR W	5/1/2023	\$ 5.41
5/31/2023	00889332	Shields Richmond,	RENT CONCENTRATOR 5LPM	5/1/2023	\$ 37.86
5/31/2023	00889332	Shields Richmond,	RENT CONCENTRATOR 5LPM	5/1/2023	\$ 37.86
5/31/2023	00889332	Shields Richmond,	RENT CONCENTRATOR 5LPM	5/1/2023	\$ 37.86
5/31/2023	00889332	Shields Richmond,	RENT CONCENTRATOR 5LPM	5/1/2023	\$ 37.86
5/31/2023	00889332	Shields Richmond,	RENT COMPRESSOR 50PSI	5/1/2023	\$ 37.86
5/31/2023	00889332	Shields Richmond,	RENT CONCENTRATOR 5LPM	5/1/2023	\$ 37.86
5/31/2023	00889332	Shields Richmond,	RENT CONCENTRATOR 5LPM	5/1/2023	\$ 37.86
5/31/2023	00889332	Shleids Richmond,	RENT COMPRESSOR 50PSI	5/1/2023	\$ 37.86
5/31/2023	00889332	Shields Richmond,	RENT E CYLINDER HOLDER FOR W	5/1/2023	\$ 5.41
5/31/2023	00889332	Shields Richmond,	RENT CONCENTRATOR 10LPM	5/1/2023	\$ 77.15
5/31/2023	00889332	Shields Richmond,	RENT CONCENTRATOR 10LPM	5/1/2023	\$ 77,15
5/31/2023	00889332	Shields Richmond,	RENT E CYLINDER HOLDER FOR W	5/1/2023	\$ 5.41

CONTINUED ON NEXT PAGE

Health Care Information is personal and sensitive information related to a person's healthcare. Such information is being faxed to you after appropriate authorization from the patient or under circumstances that do no require patient authorization. You, the recipient, are obligate to maintain it in a safe, secure, and confidential manner. Re-disclosure without additional patient consent or as permitted by law is prohibited. Unauthorized re-disclosure or fallure to maintain confidentiality could subject you to penalties under federal and state law. If you have received

Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 90 of



### MONTH END SUMMARY REPORT

THIS IS NOT A BILL. PLEASE PAY FROM YOUR INVOICES, NOT THIS SUMMARY

#### SHIELDS RICHMOND

#### CONTINUED FROM PREVIOUS PAGE

Inv Date	Invoice #	Patient	ltem	DOS	Amount
5/31/2023	00889332	Shields Richmond,	RENT E CYLINDER HOLDER FOR W	5/1/2023	\$ 5.41
5/31/2023	00889332	Shields Richmond,	RENT E CYLINDER HOLDER FOR W	5/1/2023	\$ 5.41
5/31/2023	00889332	Shields Richmond,	RENT E CYLINDER HOLDER FOR W	5/1/2023	\$ 5.41
5/31/2023	00889332	Shields Richmond,	RENT CONCENTRATOR 5LPM	5/1/2023	\$ 37.86
				<b>*</b> -4-1-	\$4.4CF.F7

Total: \$1,165.57

Thanking you in advance for your prompt payment.

Sincerely, Billing Department Interactive Medical Systems, Inc.

6/1/2023

Health Care Information is personal and sensitive information related to a person's healthcare. Such information is being faxed to you after

Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 91 of



### **FACSIMILE**

Date:

7/2/2023

To:

SHIELDS RICHMOND

Attn:

Business Office Manager (A / P) 1919 Cutting Blvd

Richmond, CA 94804 Phone: 510-233-8513 Fax: 510-236-7589

From:

**Interactive Medical Systems** 

**Billing Department** 

Phone: 888-877-0209 x200

Fax: 888-877-0212 / 310-227-8229

Regarding Oxygen Invoices for June

Please call our customer service representative, Lynette Powell with any questions that you may have this month. She can be reached at the number listed above at extension 200, or write your discrepancy on the invoice and fax back to us at 888-877-0212.

### Thank you for doing business with us!

#### Lynette Powell

Health Care Information is personal and sensitive information related to a person's healthcare. Such information is being faxed to you after appropriate authorization from the patient or under circumstances that do not require patient authorization. You, the recipient, are obligated to maintain it in a safe, secure, and confidential manner. Re-disclosure without additional patient consent or as permitted by law is prohibited. Unauthorized re-disclosure or failure to maintain confidentiality could subject you to penalties under federal and state law. If you have received this fax in error and/or are not the intended recipient, please call us immediately at (714) 894-5029 ext. 200 to receive instruction regarding the destruction or return of this sensitive information.

Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 92 of





DATE	ACCT. NO	INVOICE NUMBER
6/12/2023	18312	00891 810

### PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

S O L D	SHIELDS RICHMOND 1919 Cutting Blvd Richmond, CA 94804
т	Richmond, CA 94804

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Р	1919 Cutting Blvd
۲	Richmond, CA 94804
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910805	6/9/2023	XXX CONT-EZOX			13	EZOX GAS CONTE		\$7.84	\$1	01 9
910805	6/9/2023	SERIAL: RENTAL:  XXX DEL-ND SERIAL: RENTAL:			1	6/9/2023 TO 6/9/2 DELIVERY/PICKUF 6/9/2023 TO 6/9/2	FEE - STANDARD	\$17.31	\$	17.3
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Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 93 of



PLEASE INCLUDE THESE IN UNHERS WITH YOUR PAYMENT TO INSUJIRE PROPER CREDIT

DATE	ACCT, NO	INVOICE NUMBER
6/20/2023	18312	00892703

### PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

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H Shields Richmond,
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1919 Cutting Blvd
Richmond, CA 94804

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911765	6/20/2023	XXX CONT-EZOX SERIAL: RENTAL			12 1	EZOX GAS CONT 6/20/2023 TO 6/2		\$7.84	\$	94.0
911765	6/20/2023	XXX DEL-SD-FAC SERIAL: RENTAL:				DELIVERY/PICKU 6/20/2023 TO 6/2	P FEE - SAME DAY 0/2023	\$147.35	\$1	47.3
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Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 94 of



PLEASE INCLUDE THESE IN UMBERS WITH YOUR PAYMENT TO INSUIRE PROPER CREDIT

DATE	ACCT. NO	INVOICE NUMBER
6/30/2023	18312	00894330

#### PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

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913433	6/1/2023	XXX CYL-EZOX SERIAL: RENTAL:	<u> </u>	-	53	EZOX CYLINDER RI 6/1/2023 TO 6/1/20		\$4.33	\$229,49
913433	6/1/2023	XXX CYL-H SERIAL: RENTAL:			2	H CYLINDER RENTA 6/1/2023 TO 6/1/20		\$5,41	\$10.82
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Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 95 of



PLEASE INCLUDE THESE IN UMBERS WITH YOUR PAYMENT TO INSTURE PROPER CREDIT

DATE	ACCT, NO	INVOICE NUMBER
6/30/2023	18312	00894402

## PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

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913527	6/30/2023	XXX CONT-EZOX SERIAL: RENTAL:			16	EZOX GAS CON' 6/30/2023 TO 6/		\$7.84	\$1	25.44
913527	6/30/2023	XXX DEL-ND SERIAL: RENTAL:			1	DELIVERY/PICKI 6/30/2023 TO 6/	JP FEE - STANDARD 30/2023	\$17.31	S	317.3
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Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 96 of



PLEASE INCLUDE THESE NAUMBERS WITH YOUR PAYMENT TO INSUIRE PROPER CREDIT

DATE	ACCT. NO	INVOICE NUMBER
6/30/2023	18312	00894659

## PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

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L 1919 Cutting Blvd
Richmond, CA 94804

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T Richmond, CA 94804

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914022	6/30/2023	RNT HOLDER-E SERIAL:IM00475B RENTAL:IM00	0475B		1	RENT E CYLINDER 6/1/2023 TO 6/30/2		\$5.41	\$5.41
914022	6/30/2023	RNT HOLDER-E SERIAL:IM00479B RENTAL:IM0	0479B	1	1	RENT E CYLINDER 6/1/2023 TO 6/30/2	HOLDER FOR W/C 2023	\$5.41	\$5,41
914022	6/30/2023	RNT HOLDER-E SERIAL:IM00485B RENTAL:IM0	0485B		1	RENT E CYLINDER 6/1/2023 TO 6/30/2	HOLDER FOR W/C 2023	\$5.41	\$5.41
914022	6/30/2023	RNT CON-5 SERIAL:04F536678 RENTAL:IM	S03009	9	1	RENT CONCENTRA 6/1/2023 TO 6/30/2	5.4 P. C.	\$37.86	\$37,86
914022	6/30/2023	RNT CON-5 SERIAL:04G727956 RENTAL:IMS03474			1	RENT CONCENTR 6/1/2023 TO 6/30/	. 4 1/13/6	\$37.86	\$37.86
914022	6/30/2023	RNT CON-5 SERIAL:04G678162 RENTAL:IMS03842			1	RENT CONCENTR 6/22/2023 TO 6/30	. 1 317	\$37.86	\$37.86
914022	6/30/2023	RNT CON-5 SERIAL:04I933237 RENTAL:IMS03978		1	RENT CONCENTR 6/1/2023 TO 6/30/	\$37.86	\$37.86		
914022	6/30/2023	RNT CON-5 SERIAL:05A454978 RENTAL:IM	180439	12 1	1	RENT CONCENTR 6/22/2023 TO 6/30	1 2011 117	\$37.86	\$37.86
914022	6/30/2023	RNT COMP SERIAL:0050603 RENTAL:IMS0	6311		1	RENT COMPRESS 6/1/2023 TO 6/30/	1 1 1 1 1 1 1 1	\$37.86	\$37.86
914022	6/30/2023	RNT CON-5 SERIAL:07BSZ410935 RENTAL	:IMS08	3916	1	RENT CONCENTR 6/1/2023 TO 6/30/	1 6 77 7	\$37.86	\$37.86
914022	6/30/2023	RNT CON-5 SERIAL:09LSZ621159 RENTAL	:IMS16	6042	1	RENT CONCENTR 6/1/2023 TO 6/30/	$I \subseteq I \cap I \cap I \cap I$	\$37.86	\$37.86
914022	6/30/2023	RNT COMP SERIAL:00004148 RENTAL:IMS	518306		1	RENT COMPRESS 6/1/2023 TO 6/30/	1 - 17 - 17	\$37.86	\$37,86
914022	6/30/2023	RNT HOLDER-E SERIAL:IMS21277 RENTAL:IMS	S21277	7	1	RENT E CYLINDER 6/1/2023 TO 6/30	R HOLDER FOR W/C /2023	\$5.41	\$5,41
914022	6/30/2023	RNT CON-5 SERIAL:17AF021257 RENTAL:1	IMS269	931	1	RENT CONCENTS 6/22/2023 TO 6/3	1 1 1 7 5 8	\$37.86	\$37.86
914022	6/30/2023	RNT CON-5 SERIAL:17KF010171 RENTAL:	IMS289	960 N	( 1)	RENT CONCENTS 6/22/2023 TO 6/3		\$37.86	\$37.86
								E	
		SUBTOTAL ADJUSTMENT							·
TAX AMOUNT  AMOUNT  THIS INVOICE INCLUDING TAX									t Page

Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 97 of



PLEASE INCLUDE THESE INUMBERS WITH YOUR PAYMENT TO INSIGNE PROPER CREDIT

DATE	ACCT, NO	INVOICE NUMBER
6/23/2023	18312	00893122

### PLEASE MAKE CHECKS PAYABLE TO

INTERACTIVE MEDICAL SYSTEMS, IN C. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

s F O SHIELDS RICHMOND 1919 Cutting Blvd Richmond, CA 94804

0

s F
H Shields Richmond,
Shields Richmond
1919 Cutting Blvd
Richmond, CA 94804

ORDER N	UMBER	PURCHASE ORDER NU	MBER		SLS	TER	SHIP VIA	TERMS	IN	TIALS PA	AGE
				LTC	IMS	00	A				1
SHIPPIN NUMBER	IG ORDER DATE	IT	EM			QTY SHIPD	DESC	RIPTION	UNIT PRICE	AMOU	NT
911603	6/22/2023	RNT CON-10 SERIAL:16KF012872	RENTAL:	MS266	34	1	RENT CONCENTRA 6/1/2023 TO 6/22/2		\$77.15	\$77	.15
911603	6/22/2023	RNT CON-10 SERIAL:17CF037987	RENTAL:II	MS276	27	1	RENT CONCENTRA 6/1/2023 TO 6/22/2	TOR 10LPM	\$77.15	\$77	.15
				•			-				
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							:				
						Ш	1	SUBTOTAL		\$ 154.3	0
								ADJUSTMENT	7	\$ 0.0	0
								TAX AMOUNT		\$ 0.0	0
								AMOUNT THIS INVOICE INCLUDING TAX	\$1	54.30	

Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 98 of



PLEASE INCLUDE THESE IN UMBERS WITH YOUR PAYMENT TO INSUITE PROPER CREDIT

DATE	ACCT. NO	INVOICE NUMBER
6/21/2023	18312	00892805

## PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

s C O SHIELDS RICHMOND 1919 Cutting Blvd Richmond, CA 94804

O

s F
H Shields Richmond,
Shields Richmond
1919 Cutting Blvd
Richmond, CA 94804

ORDER NI	JMBER	PURCHASE ORDER NUMBER		SLS	TER	SHIP VIA	TERMS	IN	ITIALS	PAGE
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SHIPPIN NUMBER	G ORDER DATE	ITEM			QTY SHIPD	DESC	RIPTION	UNIT PRICE	АМС	UNT
911123	6/14/2023	AGI HCG72 SERIAL: RENTAL:			1	72" CPAP/BIPAP TU 6/14/2023 TO 6/14/		\$30.00	\$:	30.00
911123	6/14/2023	RSP 312710 SERIAL: RENTAL:	· •••		1	OXY ENRICHMENT 6/14/2023 TO 6/14/		\$4.00	:	\$4 00
911123	6/14/2023	MCK 32647 SERIAL: RENTAL:			1	TUBING OXYGEN C 6/14/2023 TO 6/14/		\$0.53		\$0.53
911123	6/14/2023	RSP 1070038 SERIAL: RENTAL:			1		JE NASAL MASK WITH	\$204.00	\$2	04.00
						H; )	H V			
							SUBTOTA	<del></del>	\$ 23	
							ADJUSTMEN TAX AMOUN	+		0.00
							AMOUNT		2 <b>59</b> .	40

Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 99 of



PLEASE INCLUDE THESE IN UMBERS WITH YOUR PAYMENT TO INSTURE PROPER CREDIT

DATE	ACCT. NO	INVOICE NUMBER
6/30/2023	18312	00894659

### PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

S SHIELDS RICHMOND
L 1919 Cutting Blvd
Richmond, CA 94804

s F
H Shields Richmond,
Shields Richmond
P 1919 Cutting Blvd
T Richmond, CA 94804

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		(e)		LTC	0JB	0CA	<u> </u>			:	2
HIPPING IMBER	G ORDER DATE	ITEN	М	_		QTY SHIP'D	DE	ESCRIPTION	UNIT PRICE	AMOUN	IT.
14022	6/30/2023	RNT HOLDER-E SERIAL:IMS30036 REI	NTAL:IMS	30036	<u></u>	1	RENT E CYLIND 6/1/2023 TO 6/3	ER HOLDER FOR W/C	\$5,41	\$5.	41
14022	6/30/2023	RNT HOLDER-E SERIAL:IMS30041 RE	NTAL:IMS	30041		1	RENT E CYLIND 6/1/2023 TO 6/3	ER HOLDER FOR W/C 0/2023	\$5.41	\$5	41
14022	6/30/2023	RNT HOLDER-E SERIAL:IMS30044 RE	NTAL:IMS:	30044		1	RENT E CYLIND 6/1/2023 TO 6/3	ER HOLDER FOR W/C 80/2023	\$5.41	\$5.	41
14022	6/30/2023	RNT HOLDER-E SERIAL:IMS30049 RE	NTAL:IMS	30049		1	RENT E CYLIND 6/1/2023 TO 6/3	ER HOLDER FOR W/C 30/2023	\$5.41	<b>\$</b> 5.	41
14022	6/30/2023	RNT CON-5 SERIAL:20BF015339	RENTAL:IN	AS332	.77	1	RENT CONCENT 6/1/2023 TO 6/3		\$37.86	\$37.	86
								SUBTOT	AL	\$ 497.6	)
								ADJUSTME	NT	\$ 0.0	<u>)</u>
								TAX AMOU	NT	\$ 0.0	)
		(g - 40)						AMOUNT THIS INVOICE INCLUDING TAX	\$4	197.60	

2 Chasiness

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### MONTH END SUMMARY REPORT

THIS IS NOT A BILL. PLEASE PAY FROM YOUR INVOICES, NOT THIS SUMMARY

#### SHIELDS RICHMOND

Dear Sir / Madam,

This summary report contains charges for the current month for the patients listed below:

Inv Date	Invoice #	Patient	Item	DOS	Amount
SHIELDS	RICHMOND				
6/12/2023	00891810	Shields Richmond,	EZOX GAS CONTENT	6/9/2023	\$ 101,92
6/12/2023	00891810	Shields Richmond,	DELIVERY/PICKUP FEE - STANDA	6/9/2023	\$ 17.31
6/20/2023	00892703	Shields Richmond,	EZOX GAS CONTENT	6/20/2023	\$ 94.08
6/20/2023	00892703	Shields Richmond	DELIVERY/PICKUP FEE - SAME D	6/20/2023	\$ 147.35
5/21/2023	00892805	Shields Richmond,	72" CPAP/BIPAP TUBING RESUAB	6/14/2023	\$ 32.63
3/21/2023	00892805	Shields Richmond,	OXY ENRICHMENT ATTACHMENT	6/14/2023	\$ 4.35
5/21/2023	00892805	Shields Richmond,	TUBING OXYGEN CRUSH RES 7"	6/14/2023	\$ 0.58
5/21/2023	00892805	Shields Richmond,	COMFORTGEL BLUE NASAL MASK W	6/14/2023	\$ 221.85
5/23/2023	00893122	Shields Richmond,	RENT CONCENTRATOR 10LPM	6/1/2023	\$ 77.15
6/23/2023	00893122	Shields Richmond	RENT CONCENTRATOR 10LPM	6/1/2023	\$ 77,15
6/30/2023	00894330	Shields Richmond,	EZOX CYLINDER RENTAL	6/1/2023	\$ 229,49
5/30/2023	00894330	Shields Richmond,	H CYLINDER RENTAL	6/1/2023	\$ 10.82
5/30/2023	00894402	Shields Richmond,	EZOX GAS CONTENT	6/30/2023	\$ 125.44
6/30/2023	00894402	Shields Richmond	DELIVERY/PICKUP FEE - STANDA	6/30/2023	\$ 17,31
6/30/2023	00894659	Shields Richmond,	RENT E CYLINDER HOLDER FOR W	6/1/2023	\$ 5.41
6/30/2023	00894659	Shields Richmond	RENT E CYLINDER HOLDER FOR W	6/1/2023	\$ 5.41
6/30/2023	00894659	Shields Richmond,	RENT E CYLINDER HOLDER FOR W	6/1/2023	\$ 5.41
6/30/2023	00894659	Shields Richmond,	RENT CONCENTRATOR 5LPM	6/1/2023	\$ 37.86
6/30/2023	00894659	Shields Richmond,	RENT CONCENTRATOR 5LPM	6/1/2023	\$ 37.86
6/30/2023	00894659	Shields Richmond,	RENT CONCENTRATOR 5LPM	6/22/2023	\$ 37,86
6/30/2023	00894659	Shields Richmond,	RENT CONCENTRATOR 5LPM	6/1/2023	\$ 37.86
6/30/2023	00894659	Shields Richmond,	RENT CONCENTRATOR 5LPM	6/22/2023	\$ 37.86
6/30/2023	00894659	Shields Richmond	RENT COMPRESSOR 50PSI	6/1/2023	\$ 37.86
6/30/2023	00894659	Shields Richmond,	RENT CONCENTRATOR 5LPM	6/1/2023	\$ 37.86
6/30/2023	00894659	Shields Richmond,	RENT CONCENTRATOR 5LPM	6/1/2023	\$ 37.86
6/30/2023	00894659	Shields Richmond,	RENT COMPRESSOR 50PSI	6/1/2023	\$ 37.86

CONTINUED ON NEXT PAGE

Health Care Information is personal and sensitive information related to a person's healthcare. Such information is being faxed to you after appropriate authorization from the patient or under circumstances that do no require patient authorization. You, the recipient, are obligate to maintain it in a safe, secure, and confidential manner, Re-disclosure without additional patient consent or as permitted by law is prohibited. Unauthorized re-disclosure or failure to maintain confidentiality could subject you to cenalties under federal and state law. If you have received



### MONTH END SUMMARY REPORT

THIS IS NOT A BILL. PLEASE PAY FROM YOUR INVOICES, NOT THIS SUMMARY

#### SHIELDS RICHMOND

#### CONTINUED FROM PREVIOUS PAGE

Inv Date	Invoice #	Patient	ltem	DOS	Amount
6/30/2023	00894659	Shields Richmond,	RENT E CYLINDER HOLDER FOR W	6/1/2023	\$ 5.41
6/30/2023	00894659	Shields Richmond,	RENT CONCENTRATOR 5LPM	6/22/2023	\$ 37.86
6/30/2023	00894659	Shields Richmond,	RENT CONCENTRATOR 5LPM	6/22/2023	\$ 37.86
6/30/2023	00894659	Shields Richmond,	RENT E CYLINDER HOLDER FOR W	6/1/2023	\$ 5.41
6/30/2023	00894659	Shields Richmond	RENT E CYLINDER HOLDER FOR W		\$ 5,41
6/30/2023	00894659	Shields Richmond.	RENT E CYLINDER HOLDER FOR W		\$ 5.41
6/30/2023	00894659	Shields Richmond	RENT E CYLINDER HOLDER FOR W		\$ 5.41
6/30/2023	00894659	Shields Richmond,	RENT CONCENTRATOR 5LPM	6/1/2023	\$ 37.86

Total: \$1,655.02

Thanking you in advance for your prompt payment.

Sincerely, Billing Department Interactive Medical Systems, Inc.

7/2/2023

Health Care Information is personal and sensitive information related to a person's healthcare. Such information is being faxed to you after

Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 102 of



### **FACSIMILE**

Date:

8/1/2023

To:

**SHIELDS RICHMOND** 

Attn:

Business Office Manager (A / P) 1919 Cutting Blvd

Richmond, CA 94804 Phone: 510-233-8513 Fax: 510-236-7589

From:

**Interactive Medical Systems** 

**Billing Department** 

Phone: 888-877-0209 x200

Fax: 888-877-0212 / 310-227-8229

Regarding

Oxygen Invoices for July

Please call our customer service representative, Lynette Powell with any questions that you may have this month. She can be reached at the number listed above at extension 200, or write your discrepancy on the invoice and fax back to us at 888-877-0212.

### Thank you for doing business with us!

#### Lynette Powell

Health Care Information is personal and sensitive information related to a person's healthcare. Such information is being faxed to you after appropriate authorization from the patient or under circumstances that do not require patient authorization. You, the recipient, are obligated to maintain it in a safe, secure, and confidential manner. Re-disclosure without additional patient consent or as permitted by law is prohibited. Unauthorized re-disclosure or failure to maintain confidentiality could subject you to penalties under federal and state law. If you have received this fax in error and/or are not the intended recipient, please call us immediately at (714) 894-5029 ext. 200 to receive instruction regarding the destruction or return of this sensitive information.

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PLEASE INCLUDE THESE. NUMBERS WITH YOUR PAYMENT TO INSURE PROPER CREDIT

DATE	ACCT. NO	INVOICE NUMBER
7/7/2023	18312	00896850

PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

S SHIELDS RICHMOND
1919 Cutting Blvd
Richmond, CA 94804

S H Shields Richmond,
Shields Richmond
1919 Cutting Blvd
Richmond, CA 94804

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SHIPPIN UMBER	G ORDER DATE	ITEM	QTY SHIPD	DESCRIPTION	UNIT PRICE	AMOUN'
915898	7/6/2023	XXX CONT-EZOX SERIAL: RENTAL:	8	EZOX GAS CONTENT 7/6/2023 TO 7/6/2023	\$7.84	\$62.7
915898	7/6/2023	XXX DEL-ND SERIAL: RENTAL:	1	DELIVERY/PICKUP FEE - STANDARD 7/6/2023 TO 7/6/2023	\$17.31	\$17.3
1,2						
				SUBTOTA	AL .	\$ 80.03
	_			ADJUSTMEN		\$ 0.00
				TAX AMOUN	17	\$ 0.00
		2 20 20 20 20 20 20 20 20 20 20 20 20 20		AMOUNT THIS INVOICE INCLUDING TAX	\$	80.03

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PLEASE INCLUDE THESE. NUMBERS WITH YOUR PAYMENT TO INSSURE PROPER CREDIT

DATE	ACCT, NO	INVOICE NUMBER
7/26/2023	18312	00898821

PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

S HIELDS RICHMOND
L 1919 Cutting Blvd
Richmond, CA 94804

s F
H Shields Richmond,
Shields Richmond
1919 Cutting Blvd
Richmond, CA 94804

ORDER N	UMBER	PURCHASE ORDER NUMBER	SLS T	ER SHIP	VIA TERM	S	IN	TIALS PAGE
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917954	7/25/2023	XXX CONT-EZOX SERIAL: RENTAL:	16	, ,	AS CONTENT 23 TO 7/25/2023		\$7.84	\$125.4
917954	7/25/2023	XXX DEL-ND SERIAL: RENTAL:	1		RY/PICKUP FEE - \$1 23 TO 7/25/2023	randard	\$17.31	\$17.3
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	8							
		<u> </u>	<del> </del>			SUBTOTAL		\$ 142.75
						ADJUSTMEN'		\$ 0.00
						TAX AMOUN		\$ 0.00
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Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 105 of



PLEASE INCLUDE THESE. NUMBERS WITH YOUR PAYMENT TO INS URE PROPER CREDIT

DATE	ACCT. NO	INVOICE NUMBER
7/28/2023	18312	00899241

PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

S F O SHIELDS RICHMOND 1919 Cutting Blvd Richmond, CA 94804 S F
H Shields Richmond,
P Shields Richmond
1919 Cutting Blvd
T Richmond, CA 94804

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918439	7/1/2023	XXX CYL-EZOX SERIAL: RENTAL:	54	EZOX CYLINDER 7/1/2023 TO 7/1		\$4.33	\$233.8
918439	7/1/2023	XXX CYL-H SERIAL: RENTAL:	2	H CYLINDER RE 7/1/2023 TO 7/1	NTAL	\$5.41	\$10.8
						ļ	
	1	<u> </u>		<u></u>	SUBT	OTAL	\$ 244.64
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					TAX AM	OUNT	\$ 0.00
_					AMOUNT THIS INVOICE INCLUDING TAX	\$2	44.64

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PLEASE INCLUDE THESE, NUMBERS WITH YOUR PAYMENT TO INSURE PROPER CREDIT

DATE	ACCT. NO	INVOICE NUMBER
7/31/2023	18312	00899628

PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

S C S SHIELDS RICHMOND H Shields Richmond,

1919 Cutting Blvd P Shields Richmond
Richmond, CA 94804

T Richmond, CA 94804

T Richmond, CA 94804

RDER N	UMBER	PURCHASE ORDER NUMBER	SLS	TEF	R SHIP VIA TE	RMS	INI	TIALS PAGE
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SHIPPIN JMBER	G ORDER DATE	ITEM		QTY SHIP'D	DESCRIP	TION	UNIT PRICE	AMOUN
918700	7/28/2023	XXX CONT-EZOX SERIAL: RENTAL:		10	EZOX GAS CONTENT 7/28/2023 TO 7/28/2023	3	\$7.84	\$78.4
918700	7/28/2023	XXX DEL-SD-FAC SERIAL: RENTAL:		1	DELIVERY/PICKUP FEE 7/28/2023 TO 7/28/202	- SAME DAY	\$147.35	\$147.3
								J. 16.
						SUBTOTA	L	\$ 225.75
						ADJUSTMEN'	+	\$ 0.00
						TAX AMOUN	т	\$ 0.00
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PLEASE INCLUDE THESE NUMBERS WITH YOUR PAYMENT TO INSURE PROPER CREDIT

DATE	ACCT. NO	INVOICE NUMBER
7/31/2023	18312	00899957

PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

s o SHIELDS RICHMOND 1919 Cutting Blvd D Richmond, CA 94804 T

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Shields Richmond,

Shields Richmond 1919 Cutting Blvd

Richmond, CA 94804

HIPPINO MBER	DATE	ITEM	OTY SHIP'D	DESCRIPTION	UNIT PRICE	AMOUNT
19281	7/31/2023	RNT HOLDER-E SERIAL:IM00475B RENTAL:IM00475B	1	RENT E CYLINDER HOLDER FOR W/C 7/1/2023 TO 7/31/2023	\$5.41	\$5.41
19281	7/31/2023	RNT HOLDER-E SERIAL:IM00479B RENTAL:IM00479B	1	RENT E CYLINDER HOLDER FOR W/C 7/1/2023 TO 7/31/2023	\$5.41	\$5.41
19281	7/31/2023	RNT HOLDER-E SERIAL:IM00485B RENTAL:IM00485B	1	RENT E CYLINDER HOLDER FOR W/C 7/1/2023 TO 7/31/2023	<b>\$</b> 5.41	\$5.41
19281	7/31/2023	RNT CON-5 SERIAL:04F536678 RENTAL:IMS03009	1	RENT CONCENTRATOR 5LPM \$ (1/0)	\$37.86	\$37.86
19281	7/31/2023	RNT CON-5 SERIAL:04G727956 RENTAL:IMS03474	1	RENT CONCENTRATOR 5LPM 7/1/2023 TO 7/31/2023 V	\$37.86	<b>\$</b> 37.86
19281	7/31/2023	RNT CON-5 SERIAL:04G678162 RENTAL:IMS03842	1	RENT CONCENTRATOR 5LPM 7/1/2023 TO 7/31/2023	\$37.86	\$37.86
19281	7/31/2023	RNT CON-5 SERIAL:041933237 RENTAL:IMS03978	1	RENT CONCENTRATOR 5LPM (1/10)	\$37.86	\$37.86
19281	7/31/2023	RNT CON-5 SERIAL:05A454978 RENTAL:IMS04392	1	RENT CONCENTRATOR 5LPM	\$37.86	\$37.86
19281	7/31/2023	RNT COMP SERIAL:0050603 RENTAL:IMS06311	1	RENT COMPRESSOR 50PSI (1) (2) (3) (4)	\$37.86	\$37.86
19281	7/31/2023	RNT CON-5 SERIAL:07BSZ410935 RENTAL:IMS08916	1	RENT CONCENTRATOR 5LPM WALUPY	\$37.86	\$37.86
19281	7/31/2023	RNT CON-5 SERIAL:09LSZ621159 RENTAL:IMS16042	1	RENT CONCENTRATOR 5LPM Sindin	\$37.86	\$37.86
19281	7/31/2023	RNT COMP SERIAL:00004148 RENTAL:IMS18306	1	RENT COMPRESSOR 50PSI 7/1/2023 TO 7/31/2023	\$37.86	\$37.86
19281	7/31/2023	RNT HOLDER-E SERIAL:IMS21277 RENTAL:IMS21277	1	RENT E CYLINDER HOLDER FOR W/C 7/1/2023 TO 7/31/2023	\$5.41	\$5.41
19281	7/31/2023	RNT CON-5 SERIAL:17AF021257 RENTAL:IMS26931	1	RENT CONCENTRATOR 5LPM 7/1/2023 TO 7/31/2023	\$37.86	\$37.86
19281	7/31/2023	RNT CON-5 SERIAL:17KF010171 RENTAL:IMS28960	1	RENT CONCENTRATOR 5LPM 7/1/2023 TO 7/31/2023	\$37.86	\$37.86
SUBTOTAL						
				ADJUSTMENT	<u> </u>	
19281	7/31/2023	1	1	7/1/2023 TO 7/31/2023 JAMM		

Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 108 of



PLEASE INCLUDE THESE NUMBERS WITH YOUR PAYMENT TO INSTURE PROPER CREDIT

DATE	ACCT, NO	INVOICE NUMBER
7/31/2023	18312	00899957

## PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

S HIELDS RICHMOND
L 1919 Cutting Blvd
Richmond, CA 94804
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s F
H Shields Richmond,
Shields Richmond
1919 Cutting Blvd
T Richmond, CA 94804

SHIPPINO JMBER	G ORDER DATE	ITEM	OTY SHIPT	DESCRIPTION	UNIT PRICE	AMOUNT
19281	7/31/2023	RNT HOLDER-E SERIAL:IMS30036 RENTAL:IMS30036	1	RENT E CYLINDER HOLDER FOR W/C 7/1/2023 TO 7/31/2023	\$5.41	\$5.41
19281	7/31/2023	RNT HOLDER-E SERIAL:IMS30041 RENTAL:IMS30041	1	RENT E CYLINDER HOLDER FOR W/C 7/1/2023 TO 7/31/2023	\$5.41	\$5.41
19281	7/31/2023	RNT HOLDER-E SERIAL:IMS30044 RENTAL:IMS30044	1	RENT E CYLINDER HOLDER FOR W/C 7/1/2023 TO 7/31/2023	\$5.41	\$5.41
19281	7/31/2023	RNT HOLDER-E SERIAL:IMS30049 RENTAL:IMS30049	1	RENT E CYLINDER HOLDER FOR W/C 7/1/2023 TO 7/31/2023	\$5.41	\$5.41
19281	7/31/2023	RNT CON-5 SERIAL:20BF015339 RENTAL:IMS33277	1	RENT CONCENTRATOR 5LPM 7/11/2023 TO 7/31/2023	\$37.86	\$37.86
10,10				SUBTOTA	L	\$ 497.60
				ADJUSTMEN	Т	\$ 0.00
				TAX AMOUN	T	\$ 0.00

16 Opin Grandel

Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 109 of



## MONTH END SUMMARY REPORT

THIS IS NOT A BILL. PLEASE PAY FROM YOUR INVOICES, NOT THIS SUMMARY

### SHIELDS RICHMOND

Dear Sir / Madam,

This summary report contains charges for the current month for the patients listed below:

inv Date	Invoice #	Patient	Item	DOS	Amount
SHIELDS	RICHMOND				
7/7/2023	00896850	Shields Richmond,	EZOX GAS CONTENT	7/6/2023	\$ 62.72
7/7/2023	00896850	Shields Richmond,	DELIVERY/PICKUP FEE - STANDA	7/6/2023	\$ 17.31
7/26/2023	00898821	Shields Richmond,	EZOX GAS CONTENT	7/25/2023	\$ 125.44
7/26/2023	00898821	Shields Richmond,	DELIVERY/PICKUP FEE - STANDA	7/25/2023	\$ 17.31
7/28/2023	00899241	Shields Richmond,	EZOX CYLINDER RENTAL	7/1/2023	\$ 233.82
7/28/2023	00899241	Shields Richmond,	H CYLINDER RENTAL	7/1/2023	\$ 10.82
7/31/2023	00899628	Shields Richmond,	EZOX GAS CONTENT	7/28/2023	\$ 78.40
7/31/2023	00899628	Shields Richmond,	DELIVERY/PICKUP FEE - SAME D	7/28/2023	\$ 147,35
7/31/2023	00899957	Shields Richmond,	RENT E CYLINDER HOLDER FOR W	7/1/2023	\$ 5.41
7/31/2023	00899957	Shields Richmond,	RENT E CYLINDER HOLDER FOR W	7/1/2023	\$ 5.41
7/31/2023	00899957	Shields Richmond,	RENT E CYLINDER HOLDER FOR W	7/1/2023	\$ 5.41
7/31/2023	00899957	Shields Richmond,	RENT CONCENTRATOR 5LPM	7/1/2023	\$ 37.86
7/31/2023	00899957	Shields Richmond,	RENT CONCENTRATOR 5LPM	7/1/2023	\$ 37.86
7/31/2023	00899957	Shields Richmond,	RENT CONCENTRATOR 5LPM	7/1/2023	\$ 37.86
7/31/2023	00899957	Shields Richmond,	RENT CONCENTRATOR 5LPM	7/1/2023	\$ 37.86
7/31/2023	00899957	Shields Richmond,	RENT CONCENTRATOR 5LPM	7/1/2023	\$ 37.86
7/31/2023	00899957	Shields Richmond,	RENT COMPRESSOR 50PSI	7/1/2023	\$ 37.86
7/31/2023	00899957	Shields Richmond,	RENT CONCENTRATOR 5LPM	7/1/2023	\$ 37.86
7/31/2023	00899957	Shields Richmond,	RENT CONCENTRATOR 5LPM	7/1/2023	\$ 37.86
7/31/2023	00899957	Shields Richmond,	RENT COMPRESSOR 50PSI	7/1/2023	\$ 37.86
7/31/2023	00899957	Shields Richmond,	RENT E CYLINDER HOLDER FOR W	7/1/2023	\$ 5.41
7/31/2023	00899957	Shields Richmond,	RENT CONCENTRATOR 5LPM	7/1/2023	\$ 37.86
7/31/2023	00899957	Shields Richmond,	RENT CONCENTRATOR 5LPM	7/1/2023	\$ 37.86
7/31/2023	00899957	Shields Richmond,	RENT E CYLINDER HOLDER FOR W	7/1/2023	\$ 5.41
7/31/2023	00899957	Shields Richmond,	RENT E CYLINDER HOLDER FOR W	7/1/2023	\$ 5.41
7/31/2023	00899957	Shields Richmond,	RENT E CYLINDER HOLDER FOR W	7/1/2023	\$ 5.41

**CONTINUED ON NEXT PAGE** 

Health Care Information is personal and sensitive information related to a person's healthcare. Such information is being faxed to you after appropriate authorization from the patient or under circumstances that do no require patient authorization. You, the recipient, are obligate to maintain it in a safe, secure, and confidential manner. Re-disclosure without additional patient consent or as permitted by law is prohibited. Unauthorized re-disclosure or failure to maintain confidentiality could subject you to cenalties under federal and state law. If you have received

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## MONTH END SUMMARY REPORT

THIS IS NOT A BILL. PLEASE PAY FROM YOUR INVOICES, NOT THIS SUMMARY

### SHIELDS RICHMOND

#### CONTINUED FROM PREVIOUS PAGE

Inv Date	Invoice #	Patient	ltem	DOS	Amount
7/31/2023	00899957	Shields Richmond,	RENT E CYLINDER HOLDER FOR W	7/1/2023	\$ 5.41
7/31/2023	00899957	Shields Richmond,	RENT CONCENTRATOR 5LPM	7/1/2023	\$ 37.86
		A 4 6 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Total:	\$1,190,77

Thanking you in advance for your prompt payment.

Sincerely, Billing Department Interactive Medical Systems, Inc.

8/1/2023

Health Care Information is personal and sensitive information related to a person's healthcare. Such information is being faxed to you after appropriate authorization from the national or under circumstances that do no require national authorization. You the recipient are obligate to

Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 111 of



### **FACSIMILE**

Date:

9/1/2023

To:

**SHIELDS RICHMOND** 

Attn:

Business Office Manager (A / P) 1919 Cutting Blvd

Richmond, CA 94804 Phone: 510-233-8513 Fax: 510-236-7589

From:

**Interactive Medical Systems** 

**Billing Department** 

Phone: 888-877-0209 x200

Fax:

888-877-0212 / 310-227-8229

Regarding

**Oxygen Invoices for August** 

Please call our customer service representative, Lynette Powell with any questions that you may have this month. She can be reached at the number listed above at extension 200, or write your discrepancy on the invoice and fax back to us at 888-877-0212.

### Thank you for doing business with us!

#### **Lynette Powell**

Health Care Information is personal and sensitive information related to a person's healthcare. Such information is being faxed to you after appropriate authorization from the patient or under circumstances that do not require patient authorization. You, the recipient, are obligated to maintain it in a safe, secure, and confidential menner. Re-disclosure without additional patient consent or as permitted by law is prohibited. Unauthorized re-disclosure or failure to maintain confidentiality could subject you to penalties under federal and state law. If you have received this fax in error and/or are not the intended recipient, please call us immediately at (714) 894-5029 ext. 200 to receive instruction regarding the destruction or return of this sensitive information..

Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 112 of



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# ORIGINAL CLAIM / INVOICE

PLEASE INCLUDE THESE MIMBERS WITH YOUR PAYMENT TO INSURE PROPER CREDIT

DATE	ACCT. NO	INVOICE NUMBER
8/9/2023	18312	00902435

**REVISED** 7:12 am, Sep 02, 2023

PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789
LOS ANGELES, CA 90084-3789
888-877-0209

Shields Richmond, Shields Richmond 1919 Cutting Blvd Richmond, CA 94804 Shields Richmond,
Shields Richmond
Shields Richmond
1919 Cutting Blvd
Richmond, CA 94804

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921568	8/9/2023	XXX DEL-ND SERIAL: RENTAL:			1	DELIVERY/PICK 8/9/2023 TO 8/9	CUP FEE - STANDARD 9/2023	\$17.13	\$17.10
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							SUBTO		\$ 17,13
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Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 113 of



PLEASE INCLUDE THESE NUMBERS WITH YOUR PAYMENT TO INSURE PROPER CREDIT

DATE	ACCT. NO	INVOICE NUMBER
8/1/2023	18312	00901650

PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

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L 1919 Cutting Blvd
Richmond, CA 94804

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H Shields Richmond,
I Shields Richmond
P 1919 Cutting Blvd
T Richmond, CA 94804

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920757	8/1/2023	XXX CONT-EZOX SERIAL: RENTAL:		14	EZOX GAS CONTENT 8/1/2023 TO 8/1/2023	\$7.84	\$109.76
920757	8/1/2023	XXX DEL-ND SERIAL: RENTAL:		1	DELIVERY/PICKUP FEE - STANDARD 8/1/2023 TO 8/1/2023	\$17.31	\$17.31
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PLEASE INCLUDE THESE: NUMBERS WITH YOUR PAYMENT TO INSSURE PROPER CREDIT

DATE	ACCT. NO	INVOICE NUMBER
8/9/2023	18312	00902435

PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

S O L D	SHIELDS RICHMOND 1919 Cutting Blvd Richmond, CA 94804
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H Shields Richmond,
Shields Richmond
1919 Cutting Blvd
Richmond, CA 94804

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921568	8/9/2023	XXX CONT-EZOX SERIAL: RENTAL:	,	17	EZOX GAS CONTENT 8/9/2023 TO 8/9/2023	\$7.84	\$133.28
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PLEASE INCLUDE THESE NUMBERS WITH YOUR PAYMENT TO INSTURE PROPER CREDIT

DATE	ACCT. NO	INVOICE NUMBER
8/16/2023	18312	00903095

PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

S SHIELDS RICHMOND
1919 Cutting Blvd
Richmond, CA 94804

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H Shields Richmond,
I Shields Richmond
P 1919 Cutting Blvd
T Richmond, CA 94804

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922286	8/16/2023	XXX CONT-EZOX SERIAL: RENTAL:	14	EZOX GAS CONTENT 8/16/2023 TO 8/16/2023	\$7.84	\$109.7
922286	8/16/2023	XXX DEL-ND SERIAL: RENTAL:	1	DELIVERY/PICKUP FEE - STANDARD 8/16/2023 TO 8/16/2023	\$17.31	\$17.3
		# 				
				<b>*</b>		
	<u> </u>			SUBTOT	AL	\$ 127.07
				ADJUSTME	<del></del>	\$ 0.00
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			_	AMOUNT THIS INVOICE INCLUDING TAX	\$1	127.07

Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 116 of



PLEASE INCLUDE THESE INUMBERS WITH YOUR PAYMENT TO INSURE PROPER CREDIT

DATE	ACCT. NO	INVOICE NUMBER		
8/23/2023	18312	00903868		

PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

S F O SHIELDS RICHMOND 1919 Cutting Blvd Richmond, CA 94804 s F H Shields Richmond, I Shields Richmond 1919 Cutting Blvd T Richmond, CA 94804

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SHIPPIN IUMBER	IG ORDER DATE	ITEM			QTY SHIP'D	DESCRIPTION	UNIT PRICE	AMOUNT
923060	8/22/2023	XXX CONT-EZOX SERIAL: RENTAL:			22	EZOX GAS CONTENT 8/22/2023 TO 8/22/2023	\$7.84	\$172.48
923060	8/22/2023	XXX DEL-ND SERIAL: RENTAL:			1	DELIVERY/PICKUP FEE - STANDAR 8/22/2023 TO 8/22/2023	\$17.31	\$17.31
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<u> </u>	1			_	<b>L</b>	SU	BTOTAL	\$ 189.79
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Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 117 of



PLEASE INCLUDE THESE NUMBERS WITH YOUR PAYMENT TO IN SURE PROPER CREDIT

DATE	ACCT. NO	INVOICE NUMBER
8/30/2023	18312	009O4925

## PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

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O	SHIELDS RICHMOND	H
L	1919 Cutting Blvd	I
D	Richmond, CA 94804	P
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<u>'</u>	Shields Richmond
Р	1919 Cutting Blvd
Ţ	Richmond, CA 94804

Shields Richmond,

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924213	8/29/2023	XXX CONT-EZOX SERIAL: RENTAL:			20	EZOX GAS CON 8/29/2023 TO 8/		\$7.84	\$156.8
924213	8/29/2023	XXX DEL-ND SERIAL: RENTAL:			1		UP FEE - STANDARD	\$17.31	\$17.3
	1						SUBTO	AL	\$ 174.11
							ADJUSTME		\$ 0.00
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		27.30 1	3/4				AMOUNT THIS INVOICE INCLUDING TAX	\$1	74.11

Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 118 of



PLEASE INCLUDE THESE NUMBERS WITH YOUR PAYMENT TO INSUITE PROPER CREDIT

DATE	ACCT: NO	INVOICE NUMBER
8/31/2023	18312	00905406

PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

s F o SHIELDS RICHMOND 1919 Cutting Blvd Richmond, CA 94804 s F
H Shields Richmond,
Shields Richmond
1919 Cutting Blvd
T Richmond, CA 94804

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SHIPPIN NUMBER	G ORDER DATE	ITEM	LTC IMS 0C	DESCRIPTION	UNIT PRICE	
924701	8/1/2023	XXX CYL-EZOX SERIAL: RENTAL:	45	EZOX CYLINDER RENTAL 8/1/2023 TO 8/1/2023	\$4.33	\$194.85
924701	8/1/2023	XXX CYL-H SERIAL: RENTAL:	2	H CYLINDER RENTAL 8/1/2023 TO 8/1/2023	\$5.41	\$10.82
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				SL	JBTOTAL	\$ 205.67
				ADJU	ISTMENT	\$ 0.00
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				AMOUNT THIS INVOICE INCLUDING TAX		205.67

Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 119 of



PLEASE INCLUDE THESE INUMBERS WITH YOUR PAYMENT TO INSTURE PROPER CREDIT

DATE	ACCT, NO	INVOICE NUMBER
8/30/2023	18312	00904707

## PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

s C O SHIELDS RICHMOND 1919 Cutting Blvd Richmond, CA 94804

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Shields Richmond
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TNUC	UNIT PRICE	DESCRIPTION	QTY SHIPD	ITEM	G ORDER DATE	SHIPPINI JMBER
37,86	\$37,86	RENT CONCENTRATOR 5LPM 8/1/2023 TO 8/24/2023	1	RNT CON-5 SERIAL:04F536678 RENTAL:IMS03009	8/24/2023	23210
37.86	\$37.86	RENT CONCENTRATOR 5LPM (1/2023 TO 8/24/2023 V	1	DNT CONS	8/24/2023	23210
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25.72 0.00	Г	SUBTOTAI ADJUSTMEN				
0.00 <b>72</b>		TAX AMOUNT AMOUNT THIS INVOICE INCLUDING TAX				

Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 120 of



PLEASE INCLUDE THESE NUMBERS WITH YOUR PAYMENT TO INSUITE PROPER CREDIT

DATE	ACCT. NO	INVOICE NUMBER
8/31/2023	18312	00905620

PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

S SHIELDS RICHMOND 0 1919 Cutting Blvd D Richmond, CA 94804 T

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Shields Richmond, Н

Shields Richmond 1919 Cutting Blvd

T O Richmond, CA 94804

T	AMOUNT	UNIT PRICE	DESCRIPTION	OCA OTY SHIPO	ITEM LTC 0JB	IG ORDER DATE	SHIPPINO UMBER
1	\$5.41	\$5.41	RENT E CYLINDER HOLDER FOR W/C 8/1/2023 TO 8/31/2023	1	RNT HOLDER-E SERIAL:IM00475B RENTAL:IM00475B	8/31/2023	25112
1	\$5.41	\$5.41	RENT E CYLINDER HOLDER FOR W/C 8/1/2023 TO 8/31/2023	1	RNT HOLDER-E SERIAL:IM00479B RENTAL:IM00479B	8/31/2023	25112
1	\$5.41	\$5.41	RENT E CYLINDER HOLDER FOR W/C 8/1/2023 TO 8/31/2023	1	RNT HOLDER-E SERIAL:IM00485B RENTAL:IM00485B	8/31/2023	25112
6	\$37.86	\$37.86	RENT CONCENTRATOR 5LPM (7) Itylonia	1	RNT CON-5 SERIAL:04G727956 RENTAL:IMS03474	8/31/2023	25112
6	\$37.86	\$37.86	RENT CONCENTRATOR 5LPM	1	RNT CON-5 SERIAL:04G678162 RENTAL:IMS03842	8/31/2023	25112
86	\$37.86	\$37.86	RENT CONCENTRATOR 5LPM	1	RNT CON-5 SERIAL:041933237 RENTAL:IMS03978	8/31/2023	25112
36	\$37.86	\$37.86	RENT CONCENTRATOR 5LPM () 8/1/2023 TO 8/31/2023	1	RNT CON-5 SERIAL:05A454978 RENTAL:IMS04392	8/31/2023	925112
36	\$37.80	\$37.86	RENT COMPRESSOR 50PSI 11/2023	1	RNT COMP SERIAL:0050603 RENTAL:IMS06311	8/31/2023	925112
36	\$37.8	\$37.86	RENT CONCENTRATOR SLPM	1	RNT CON-5 SERIAL:07BSZ410935 RENTAL:IMS08916	8/31/2023	925112
36	\$37.8	\$37.86	RENT COMPRESSOR 50PSI 197/	1	RNT COMP SERIAL:00004148 RENTAL:IMS18306	8/31/2023	925112
41	\$5.4	\$5.41	RENT E CYLINDER HOLDER FOR W/C 8/1/2023 TO 8/31/2023	1	RNT HOLDER-E SERIAL:IMS21277 RENTAL:IMS21277	8/31/2023	925112
15	\$77.1	\$77.15	RENT CONCENTRATOR 10LPM (Mnd)	1	RNT CON-10 // SERIAL:16KF012872 RENTAL:IMS26634	8/31/2023	925112
86	\$37.8	\$37.86	RENT CONCENTRATOR 5LPM Mn(1/2)	1	RNT CON-5	8/31/2023	925112
86	\$37.8	\$37.86	RENT CONCENTRATOR 5LPM 8/1/2023 TO 8/31/2023 V	1	RNT CON-5 SERIAL:17KF010171 RENTAL:IMS28960	8/31/2023	925112
41	\$5.4	\$5.41	RENT E CYLINDER HOLDER FOR W/C 8/1/2023 TO 8/31/2023	1	RNT HOLDER-E SERIAL:IMS30036 RENTAL:IMS30036	8/31/2023	925112
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	t Page		TAX AMOUN  AMOUNT  THIS INVOICE INCLUDING TAX			<u> </u>	

Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 121 of



PLEASE INCLUDE THE SE NUMBERS WITH YOUR PAYMENT TO I NSURE PROPER CRED IT

DATE	ACCT, NO	INVOICE NUMBER
8/31/2023	18312	009 05620

PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO:

INTERACTIVE MEDICAL SYSTEMS, INC. P.O. BOX 843789 LOS ANGELES, CA 90084-3789 888-877-0209

s F O SHIELDS RICHMOND 1919 Cutting Blvd Richmond, CA 94804

0

Shields Richmond,
Shields Richmond
1919 Cutting Blvd
Richmond, CA 94804

ORDER N	UMBER	PURCHASE ORDER NUMBER LOC	SLS T	ER	SHIP VIA TERMS	INI	TIALS PAGE
		LTC	OJB (	OCA			2
SHIPPIN NUMBER	G ORDER DATE	ITEM	QT SHIF	TY IP'D	DESCRIPTION	UNIT PRICE	AMOUNT
925112	8/31/2023	RNT HOLDER-E SERIAL:IMS30041 RENTAL:IMS30041	1	1	RENT E CYLINDER HOLDER FOR W/C 8/1/2023 TO 8/31/2023	\$5.41	\$5.41
925112	8/31/2023	RNT HOLDER-E SERIAL:IMS30044 RENTAL:IMS30044	1	1	RENT E CYLINDER HOLDER FOR W/C 8/1/2023 TO 8/31/2023	\$5.41	\$5.41
925112	8/31/2023	RNT HOLDER-E SERIAL:IMS30049 RENTAL:IMS30049	1	1	RENT E CYLINDER HOLDER FOR W/C 8/1/2023 TO 8/31/2023	\$5.41	\$5.41
925112	8/31/2023	RNT CON-5 SERIAL:20BF015339 RENTAL:IMS3327	7 1	,	RENT CONCENTRATOR SLPM	\$37.86	\$37.86
					SUBTOTAL ADJUSTMENT TAX AMOUNT		\$ 499.03 \$ 0.00 \$ 0.00
					AMOUNT THIS INVOICE INCLUDING TAX		99.03

A Concentration

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### MONTH END SUMMARY REPORT

THIS IS NOT A BILL. PLEASE PAY FROM YOUR INVOICES, NOT THIS SUMMARY

### SHIELDS RICHMOND

Dear Sir / Madam,

This summary report contains charges for the current month for the patients listed below:

Inv Date	invoice #	Patient	Item	DOS	Amount
SHIELDS	RICHMOND				
8/1/2023	00901650	Shields Richmond,	EZOX GAS CONTENT	8/1/2023	\$ 109.76
8/1/2023	00901650	Shields Richmond,	DELIVERY/PICKUP FEE - STANDA	8/1/2023	\$ 17,31
8/9/2023	00902435	Shields Richmond,	EZOX GAS CONTENT	8/9/2023	\$ 133.28
8/16/2023	00903095	Shields Richmond,	EZOX GAS CONTENT	8/16/2023	\$ 109.76
8/16/2023	00903095	Shields Richmond,	DELIVERY/PICKUP FEE - STANDA	8/16/2023	\$ 17.31
8/23/2023	00903868	Shields Richmond,	EZOX GAS CONTENT	8/22/2023	\$ 172.48
8/23/2023	00903868	Shields Richmond,	DELIVERY/PICKUP FEE - STANDA	8/22/2023	\$ 17.31
8/30/2023	00904707	Shields Richmond,	RENT CONCENTRATOR 5LPM	8/1/2023	\$ 37.86
8/30/2023	00904707	Shields Richmond,	RENT CONCENTRATOR 5LPM	8/1/2023	\$ 37.86
8/30/2023	00904925	Shields Richmond,	EZOX GAS CONTENT	8/29/2023	\$ 156.80
8/30/2023	00904925	Shields Richmond,	DELIVERY/PICKUP FEE - STANDA	8/29/2023	\$ 17.31
8/31/2023	00905406	Shields Richmond,	EZOX CYLINDER RENTAL	8/1/2023	\$ 194.85
8/31/2023	00905406	Shields Richmond,	H CYLINDER RENTAL	8/1/2023	\$ 10.82
8/31/2023	00905620	Shields Richmond,	RENT E CYLINDER HOLDER FOR W	8/1/2023	\$ 5.41
8/31/2023	00905620	Shields Richmond,	RENT E CYLINDER HOLDER FOR W	8/1/2023	\$ 5.41
8/31/2023	00905620	Shields Richmond,	RENT E CYLINDER HOLDER FOR W	8/1/2023	\$ 5.41
8/31/2023	00905620	Shields Richmond.	RENT CONCENTRATOR 5LPM	8/1/2023	\$ 37.86
8/31/2023	00905620	Shields Richmond,	RENT CONCENTRATOR 5LPM	8/1/2023	\$ 37.86
8/31/2023	00905620	Shields Richmond,	RENT CONCENTRATOR 5LPM	8/1/2023	\$ 37.86
8/31/2023	00905620	Shields Richmond,	RENT CONCENTRATOR 5LPM	8/1/2023	\$ 37.86
8/31/2023	00905620	Shields Richmond,	RENT COMPRESSOR 50PSI	8/1/2023	\$ 37.86
8/31/2023	00905620	Shields Richmond,	RENT CONCENTRATOR 5LPM	8/1/2023	\$ 37.86
8/31/2023	00905620	Shields Richmond,	RENT COMPRESSOR 50PSI	8/1/2023	\$ 37.86
8/31/2023	00905620	Shields Richmond,	RENT E CYLINDER HOLDER FOR W	8/1/2023	\$ 5.41
8/31/2023	00905620	Shields Richmond,	RENT CONCENTRATOR 10LPM	8/24/2023	\$ 77.15
8/31/2023	00905620	Shields Richmond,	RENT CONCENTRATOR 5LPM	8/24/2023	\$ 37.86

CONTINUED ON NEXT PAGE

Health Care Information is personal and sensitive information related to a person's healthcare. Such information is being faxed to you after appropriate authorization from the patient or under circumstances that do no require patient authorization. You, the recipient, are obligate to maintain it in a safe, secure, and confidential manner. Re-disclosure without additional patient consent or as permitted by law is prohibited. Unauthorized re-disclosure or failure to maintain confidentiality could subject you to penalties under federal and state law. If you have received

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## **MONTH END SUMMARY REPORT**

THIS IS NOT A BILL. PLEASE PAY FROM YOUR INVOICES, NOT THIS SUMMARY

### SHIELDS RICHMOND

#### CONTINUED FROM PREVIOUS PAGE

Inv Date	Invoice #	Patient	Item	DOS	Amount
8/31/2023	00905620	Shields Richmond,	RENT CONCENTRATOR 5LPM	8/1/2023	\$ 37.86
8/31/2023	00905620	Shields Richmond,	RENT E CYLINDER HOLDER FOR W	8/1/2023	\$ 5.41
8/31/2023	00905620	Shields Richmond,	RENT E CYLINDER HOLDER FOR W	8/1/2023	\$ 5.41
8/31/2023	00905620	Shields Richmond,	RENT E CYLINDER HOLDER FOR W	8/1/2023	\$ 5.41
8/31/2023	00905620	Shields Richmond,	RENT E CYLINDER HOLDER FOR W	8/1/2023	\$ 5.41
8/31/2023	00905620	Shields Richmond,	RENT CONCENTRATOR 5LPM	8/1/2023	\$ 37.86

Total: \$1,548.87

Thanking you in advance for your prompt payment.

Sincerely, Billing Department Interactive Medical Systems, Inc.

9/1/2023

Health Care Information is personal and sensitive information related to a person's healthcare. Such information is being faxed to you after

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## **EXHIBIT 5**

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1 2 3 4 5 6 7 8 9		91) ER  ANKRUPTCY COURT CT OF CALIFORNIA
11	OAKLAND	DIVISION
12		CASE NO.: 23-bk-41201 CN11
13	In re:	
14	Shields Nursing Centers, Inc.,	Chapter 11  [PROPOSED] ORDER ON DEBTOR'S
15	<b> </b>	MOTION PURSUANT TO SECTIONS
16 17	Debtor-in-Possession.	363(b) AND 105(a) OF THE BANKRUPTCY CODE FOR ORDER AUTHORIZING DEBTOR TO PAY
18		CRITICAL VENDORS
19		) Date:
20		Time: Place: U.S. Bankruptcy Court
21		Courtroom 215 1300 Clay Street Oakland, CA 94612
22		Oakland, CA 94612
23		
24		{
25		<b>\</b>
26		)
27		
28		
	Case: B23 NA 1820 TCY DOOD E380 R PIREDE N 6/12/23	1 URSUANT TO SECTIONS 363(b) AND 105(a) OF THE RIZENFEDER TOWTO 23 15.26:08 Page 126 of 35

This matter came on for hearing on , 2023 (the "Hearing") to consider the Debtor's Motion Pursuant to Section 383(b) and 105(a) of the Bankruptcy Code for Order Authorizing Debtor to Pay Critical Vendors (the "Motion") filed by Shields Nursing Centers, Inc., the debtor and debtor in possession in the above-captioned case ("Debtor") in the above-captioned chapter 11 case (the "Chapter 11 Case") for the entry of an Order authorizing, but not directing, the Debtor to pay Critical Vendors pursuant to Sections 105(a), and 363 of title 11 of the United States Code (the "Bankruptcy Code"). The Court having considered the Motion and the evidence submitted in support thereof and upon the pleadings filed with, and the proceedings held before the Court, and, after due deliberation, sufficient cause appearing therefore, the Court makes the following findings of fact and conclusions of law:

## IT IS FOUND, DETERMINED, ORDERED AND ADJUDGED, THAT:

- A. <u>Jurisdiction and Venue</u>. This Court has jurisdiction over the Chapter 11 Case pursuant to 28 U.S.C. § 1334. This matter is a core proceeding pursuant to 28 U.S.C. § 157(b). Venue is proper before this Court pursuant to 28 U.S.C. §§ 1408 and 1409.
- B. Need to Use the Pay Critical Vendors. The Debtor has an immediate need to continue to use the Debtor's Critical Vendors, all of which will cease doing business with the Debtor if the Debtor does not pay for pre-petition costs of good and/or services.
- C. <u>Immediate Entry of Order</u>. For the reasons stated above, the Debtor has requested immediate entry of this Order pursuant to Bankruptcy Rule 4001(b)(2). Absent granting the relief set forth in this Order, the Debtor's business, assets, and estate will be immediately and irreparably harmed. This Court concludes that authorization to use the Cash Collateral to pay the Critical Vendors, in accordance with this Order, is therefore in the best interests of the Debtor's estate and creditors as its implementation will, among other things, allow for the continued flow of services to the Debtor necessary to sustain

the operation of the Debtor's existing business during the pendency of this Chapter 11 Case.

NOW, THEREFORE, on the Motion, the foregoing findings, acknowledgements, and conclusions, and upon the record made before the Court at the hearing, which is incorporated herein by reference, and good and sufficient cause appearing therefore,

### IT IS ORDERED that:

- 1. <u>Motion Granted.</u> The Motion is hereby granted in accordance with the terms and conditions set forth in this Order. Any objections to the Motion with respect to the entry of this Order that have not been withdrawn, waived, or settled, and all reservations of rights included therein, are hereby denied and overruled.
- 2. Payments Authorized. The Debtor is authorized but not required to pay Critical Vendors for the value of pre-petition goods and/or services as follows:

### **Critical Vendors**

Citical values				
Vendor	Prepetition Amount Owed	Goods/Service Provided to Debtor and Debtor's Necessity to Continue Working with Vendor		
Elam's Consulting & Inspection Services Inc.	\$13,750.00 Exhibit "1"	Elam's Consulting and Inspection Services Inc. is the California State Inspector which must complete the inspection of the Debtor's nurse call system. Elam's Consulting and Inspection Services Inc. pending invoices are for the installation and inspection of the Debtor's new nurse call system. The Elam Consulting and Inspection Services Inc. is requiring to be paid its pre-petition invoices in order to continue its services and sign off on the installation and inspection of Debtor's new nurse call system. Failure to obtain the California State Inspector sign off could jeopardize the licensure of the Debtor's facilities.		

Exhibit "2"  Exhibit "3"  Exhib	1		
with the Debtor to provide the Debtor's rehab patients physical therapy, occupational therapy and speech therapy services. Providence Rehab must be paid its past-due balance so that it will continue to provide necessary therapy services to the Debtor's patients. The Debtor has already billed Medicare and the various insurance companies for the work performed by Providence Rehab and was paid for Providence Rehab its portion of the insurance proceeds the Debtor has already collected to ensure will not be a disruption to Debtor's therapy services provided to its rehab patients.  Interactive Medical Systems Inc.  Sexhibit "4"  Sexhibit "4"  Sexhibit "4"  Interactive Medical System is the sole provider of Oxygen tanks to the Debtor. Debtor must have a consistent supply to Oxygen tanks for its residents. Interactive Medical System indicated to the Debtor that it will stop services until the pre-petition invoices are paid in full. Requiring the Debtor to seek a new provider will cause a significant disruption to Debtor's business and to healthcare provided to Debtor's patients.	Essentials	Exhibit "2"	Debtor. Debtor is required by health regulatory mandates to have its residents regularly reviewed by a dietician. Nutrition Therapy Essentials is the only company in the area that can provide dietician services to the Debtor's residents. Nutrition Therapy Essentials has stopped providing postpetition services to the Debtor and has indicated it will not continue providing services to the Debtor until the pre-petition past due invoice(s) are paid.
Systems Inc.  Exhibit "4"  Exhibit "4"  Exhibit "4"  Debtor must have a consistent supply to Oxygen tanks for its residents. Interactive Medical System indicated to the Debtor that it will stop services until the pre-petition invoices are paid in full. Requiring the Debtor to seek a new provider will cause a significant disruption to Debtor's business and to healthcare provided to Debtor's patients.	Group, Inc.	Exhibit "3"	with the Debtor to provide the Debtor's rehab patients physical therapy, occupational therapy and speech therapy services.  Providence Rehab must be paid its past-due balance so that it will continue to provide necessary therapy services to the Debtor's patients. The Debtor has already billed Medicare and the various insurance companies for the work performed by Providence Rehab and was paid for Providence Rehab's services. Debtor must pay Providence Rehab its portion of the insurance proceeds the Debtor has already collected to ensure will not be a disruption to Debtor's therapy services provided to its rehab patients.
Total \$187,195.74	111	Exhibit "4"	provider of Oxygen tanks to the Debtor. Debtor must have a consistent supply to Oxygen tanks for its residents. Interactive Medical System indicated to the Debtor that it will stop services until the pre-petition invoices are paid in full. Requiring the Debtor to seek a new provider will cause a significant disruption to Debtor's business and to healthcare provided to Debtor's
	Total	\$187,195.74	

4
[PROPOSED] ORDER ON DEBTOR'S MOTION PURSUANT TO SECTIONS 363(b) AND 105(a) OF THE CaseBANKAUDICY GODE FOR PROFERIOUTHORIS DEBTOR TO PAGE 129 of 135

Retention of Jurisdiction. The Court has and will retain jurisdiction to

### PROOF OF SERVICE OF DOCUMENT

I am over the age of 18 and not a party to this bankruptcy case or adversary proceeding. My business address is: 9454 Wilshire Blvd., 6th Fl., Beverly Hills, CA 90212

A true and correct copy of the foregoing document entitled (specify): DEBTOR'S MOTION PURSUANT TO SECTIONS 363(b) AND 105(a) OF THE BANKRUPTCY CODE FOR ORDER AUTHORIZING DEBTOR TO PAY CRITICAL VENDORS; MEMORANDUM OF POINTS AND AUTHORITIES; STATEMENT REGARDING CASH COLLATERAL; DECLARATION OF WILLIAM M. SHIELDS JR. IN SUPPORT THEREOF will be served or was served (a) on the judge in

chambers in the form and manner required by LBR 5005-2(d); and (b) in the manner stated below: 1. TO BE SERVED BY THE COURT VIA NOTICE OF ELECTRONIC FILING (NEF): Pursuant to controlling General Orders and LBR, the foregoing document will be served by the court via NEF and hyperlink to the document. On (date) 10/12/2023, I checked the CM/ECF docket for this bankruptcy case or adversary proceeding and determined that the following persons are on the Electronic Mail Notice List to receive NEF transmission at the email addresses stated below: Debtor's Proposed Counsel: Michael Jay Berger michael.berger@bankruptcypower.com, michael.berger@ecf.courtdrive.com U.S. Trustee: Trevor Ross Fehr trevor.fehr@usdoj.gov USTPRegion17.OA.ECF@usdoj.gov Office of the U.S. Trustee/Oak Service information continued on attached page 2. SERVED BY UNITED STATES MAIL: On 10/12/2023, I served the following persons and/or entities at the last known addresses in this bankruptcy case or adversary proceeding by placing a true and correct copy thereof in a sealed envelope in the United States mail, first class. postage prepaid, and addressed as follows. Listing the judge here constitutes a declaration that mailing to the judge will be completed no later than 24 hours after the document is filed. Service information continued on attached page 3. SERVED BY PERSONAL DELIVERY, OVERNIGHT MAIL, FACSIMILE TRANSMISSION OR EMAIL (state method for each person or entity served): Pursuant to F.R.Civ.P. 5 and/or controlling LBR, on 10/12/2023, I served the following persons and/or entities by personal delivery, overnight mail service, or (for those who consented in writing to such service method), by facsimile transmission and/or email as follows. Listing the judge here constitutes a declaration that personal delivery on, or overnight mail to, the judge will be completed no later than 24 hours after the document is filed. Honorable Charles Novack United States Bankruptcy Court 1300 Clay Street, Crtrm 215 Oakland, CA 94612 ☐ Service information continued on attached page I declare under penalty of perjury under the laws of the United States that the foregoing is true and correct. /s/Peter Garza Peter Garza 10/12/2023 Signature

This form is mandatory. It has been approved for use by the United States Bankruptcy Court for the Central District of California.

Printed Name

Date

F 9013-3.1.PROOF.SERVICE

#### 2. SERVED BY UNITED STATES MAIL:

U.S. Trustee Attn: Trevor Ross Fehr, Esq. 280 S 1st St. \$#268 San Jose, CA 95113

#### **SECURED CREDITORS:**

BizFund LLC 2371 McDonald Ave., 2nd Floor Brooklyn, NY 11223

BlueVine 401 Warren St., Ste 300 Redwood City, CA 94063

CT Corporation System, as representative 330 N. Brand Blvd., Ste 700 Glendale, CA 91203

Dimension Funding, LLC 6 Hughes Street #220 Irvine, CA 92618

Employee Development Department Bankruptcy Group MIC 92E PO Box 826880 Sacramento, CA 94280-0001

First Corporate Solutions, representative 914 S. Street Sacramento, CA 95811

U.S. Small Business Administration c/o Anne Manalili El Paso Loan Service Center 10737 Gateway West, Ste. 300 El Paso, TX 79935

U.S. Small Business Administration Attn: District Counsel c/o Anne Manalili 455 Market Street, Suite 600 San Francisco, CA 94105

Leaf Capital Funding, LLC 2005 Market Street, 14th Fl Philadelphia, PA 19103

This form is mandatory. It has been approved for use by the United States Bankruptcy Court for the Central District of California.

UFS West LLC 1915 Hollywood Blvd., Suite 200A Hollywood, FL 33020

Webfund 99 Washington Ave., Ste 1008 Albany, NY 12260

#### 20 LARGEST UNSECURED CREDITORS:

AMPG Healthcare Solution, Inc 1313 N. Milpitas Blvd #154 Milpitas, CA 95035

BizFund LLC 2371 McDonald Ave., 2nd Floor Brooklyn, NY 11223

BlueVine 401 Warren St., Ste 300 Redwood City, CA 94063

CTI III, LLC CTI Corporate Tax Incentives 1720 Prairie City Rd., Ste 120 Folsom, CA 95630

Dept. of Health Care Services Acct Sect/Cashiers Unit, MS 1101 PO Box 997415 Sacramento, CA 95899-7415

Dimension Funding, LLC 6 Hughes Street #220 Irvine, CA 92618

Diagnostic Laboratories SL Community Mobile Diagnostic Attn: Cash Applications PO Box 676210 Dallas, TX 75267-6210

El Cerrito Investment Group, LLC Eyring Realty, Inc PO Box 2408 Danville, CA 94526 El Cerrito Investment Group, LLC c/o Lane Powell PC Attn: James B. Zack 1420 Fifth Ave., Ste. 4200 Seattle, WA 98101 (Address from POC)

Earleen Miller c/o Labor Commissioner Office 1515 Clay St., Ste 801 Oakland, CA 94612

Graph Insurance Group c/o Lipsius-Benhaim Law, LLP Attn: Meir L. Goldberg 80-02 Kew Gardens Rd, Ste 1030 Kew Gardens, NY 11415

Internal Revenue Service P O Box 7346 Philadelphia, PA 19101-7346

James Prasad 29910 Bello View Place Hayward, CA 94544

Kaiser Foundation Health Plan, Inc File 5915 Purchase #602186-0000 Los Angeles, CA 90074-5915

McKesson Medial-Surgical #31714 PO Box 630693 Cincinnati, OH 45263-0693

Nextaff Group, LLC c/o Webster Bank PO Box 847637 Boston, MA 02284

Pharmerica Attn: LeeAnn - AR PO Box 409251 Atlanta, GA 30384-9251

Shiftmed, LLC PO Box 124004 Dallas, TX 75312

This form is mandatory. It has been approved for use by the United States Bankruptcy Court for the Central District of California.

U.S. Small Business Administration c/o Anne Manalili El Paso Loan Service Center 10737 Gateway West, Ste. 300 El Paso, TX 79935

U.S. Small Business Administration Attn: District Counsel c/o Anne Manalili 455 Market Street, Suite 600 San Francisco, CA 94105

UFS West LLC 1915 Hollywood Blvd., Suite 200A Hollywood, FL 33020

Webfund 99 Washington Ave., Ste 1008 Albany, NY 12260

#### **CRITICAL VENDORS:**

Elam's Consulting & Inspection Services Inc. 164 Robles Dr. #270 Vallejo, CA 94591

Interactive Medical Systems Inc PO Box 843789 Los Angeles, CA 90084

Nutrition Therapy Essentials 2350 W. Shaw Ave., Ste. 106 Fresno, CA 93711

Providence Rehab Group, Inc. PO Box 5215 Novato, CA 94948

June 2012 F 9013-3.1.FROOF.3ER Case: 23-41201 Doc# 38 Filed: 10/12/23 Entered: 10/12/23 19:26:08 Page 135 of